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ABSTRACT

This curriculum guide, one of nine sequential manuals for elementary and secondary teachers and administrators, is designed to prevent drug misuse and abuse through activities for developing students' cognitive and affective skills. The materials emphasize the involvement of parents and community members and resources in implementing drug abuse prevention programs. The development of self-image and positive self-concept, communication skills, and coping skills comprise the three components of an affective model upon which this guide is based. The introductory section provides background information, e.g., curriculum evaluation, facilitator instructions, a topical outline of the curriculum, teaching methods, characteristics of early and late childhood, and an activity index. The format of the instructional units section consists of concepts, learning objectives and activities, and teacher information and resources. A preliminary materials list, worksheets, a glossary of terms, and illustrations are also included. Activities at the high school level focus on: (1) the effects of drugs on the homeostasis of the body; (2) drugs and society; (3) communication skills; and (4) motivations and alternatives. The 14 appendices provide references on teaching methods, agencies, resources, packaged programs for health and drug education, materials of special interest to minority groups, and a chart of alternatives to drug use. (KMF)

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ED214097

# HEALTH EDUCATION: SUBSTANCE ABUSE PREVENTION

## DRUG EDUCATION CURRICULUM

## SENIOR HIGH

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Bureau of Drug Education

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# FOREWORD

This new Drug Education Curriculum Guide is one of nine separate documents - one for each elementary grade level, K-6, one for junior high, and one for senior high. The curriculum is intended for use in all of the schools, public and nonpublic, in New York State. It was developed as a direct result of the Board of Regents Action Plan to Reduce Alcohol and Drug Abuse in the Schools. The Plan was adopted by the Board in May 1979 in response to the problems of substance abuse which have and continue to be of great concern in our society.

The Curriculum provides school administrators, Health and Drug Coordinators and teachers with direct assistance in meeting the requirements of New York State Statute Chapter 982, 1977 (Education Law, Section 804) and insuring compliance with the Regulations of the Commissioner of Education, particularly Sections 135.1 and 135.3.

A cooperative school/community relationship is essential to the development of a comprehensive drug education program in which this new curriculum can be the foundation piece. While the curriculum can be implemented without extensive inservice education, an orientation workshop would be helpful and is recommended. The actual use of the curriculum will in itself be an inservice experience for the teachers.

It is generally acknowledged that the cost of substance abuse in our nation is enormous. A recent report of the U.S. Office of Drug Abuse Prevention estimates our annual cost to be: alcohol - $42.7 billion, tobacco - $25 billion, and drug abuse - $10.3 billion. While a large portion of these costs are appropriately targeted for treatment and rehabilitation, it is very important to focus more attention on the implementation of primary prevention programs. The logic of effective primary prevention as a means of reducing the costs of rehabilitation and treatment would seem to be self-evident; yet it is unfortunately often overlooked in assigning funds for the development and implementation of programs. While it is, and should be, a matter of priority that the afflicted receive our first attention, many of those not afflicted, if neglected, may soon join them. A majority of students in our schools today need help in acquiring some of the attitudes and skills included in this curriculum to enable them to be responsible for using substances wisely to maintain health.

In addition to this Drug Education Curriculum, the Bureau of Drug Education has prepared other supportive curricula and documents. These include: Alcohol Education Curriculum, Tobacco Education Curriculum, Elementary and Secondary Annotated Resource Guides and School Smoking and Drug Policy Guidelines. School authorities can obtain copies of these materials by writing to: Bureau of Drug Education, 960 EBA, Albany, NY 12234.

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# THE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM

## THE SCHOOL'S ROLE

Drugs are a part of everyday life in our society, and drugs and drug paraphernalia may usually be obtained by those who wish to use them. While there are many ways to approach the problem of drug misuse and abuse - through legislation; incarceration; controls on growing, manufacturing and marketing; increased supervision of young people, etc. -clearly the most effective approach is to remove the self-destructive and/or misdirected motivations of people who engage in drug misuse and abuse behavior.

While schools cannot achieve this goal alone, they can help lead the way. School drug education programs can promote and direct positive motivations in children through the integration of knowledge with affective skills development; also, schools are perhaps uniquely able to serve as catalysts for bringing communities together for a cooperative effort in a supportive environment.

As a cooperative school-community program progresses, participants will become aware that their efforts are not only leading them to make an impact on the problem of drug abuse among youngsters, but they are also producing healthy side-effects. These side effects have far-reaching implications for overall health, school achievement, improved attendance and reduced vandalism and delinquency. A new sense of pride and purpose grows among all those involved in, and affected by, the program.

## SCHOOL RESPONSIBILITIES

All schools have several basic responsibilities for drug abuse prevention programs, as outlined by Education Law, Section 804, Commissioner's Regulations as they apply to all of Health Education, and the Regents Action Plan to Reduce Alcohol and Drug Abuse in the Schools. These include:

1. To provide all students, K-12, with an instructional program designed to develop the attitudes and skills required to make healthy decisions.
2. To involve students in activities that contribute to their sense of self-worth.
3. To insure that the instructional program is conducted by teachers with adequate preparation who provide healthy models for their students.
4. To integrate learning with related subject areas in a manner supportive of program objectives.
5. To coordinate in-school programs - education and service - for more effective drug abuse prevention.
6. To coordinate school programs with those offered by the community, cooperate with community agencies and utilize community resources to reinforce learning in both settings (school and community).
7. To develop, for general publication, written policies and procedures for handling all drug-related situations which may occur on school property. These policies and procedures should emphasize: 1) referral processes that

demonstrate a desire to help and rehabilitate students and faculty with drug-related problems and 2) "due process" for students or staff members charged with violations of school policies or laws.

8. To involve parents, students, community agency professionals and community leaders along with school staff in planning program policies and reviewing or participating in other aspects of the program.

## OBTAINING SUPPORT FOR PROGRAM IMPLEMENTATION

Basic to the success of the school drug abuse prevention program is the support obtained from the school board, administration, parents, and the community at large. Where to begin is a judgment best made locally. Some suggestions regarding what to begin with may help you decide the most productive route in your district or school. Before you start, it is suggested that you have:

1. A clear understanding of the school's role in preventing substance misuse and abuse and of effective teaching methods for meeting this goal (e.g., an emphasis on positive self-concept and the development of life skills, with drug information presented within the context of affective objectives).
2. Statistics from recent surveys regarding drug misuse and abuse among youngsters on national, state and local (if available) levels.
3. A list of key people in the community whom you believe will be supportive.
4. Support from community agencies and experts. (It is a good idea to call or visit the March of Dimes, Council on Alcoholism, Community Mental Health Center, Drug Abuse Council and/or County Health Department, for example.)
5. A list of community, state and federal resources that can be used in the program. (See chart, p. x, for ideas.)
6. Ideas for promoting cooperative efforts to meet needs and fill possible deficiencies.

## PARENT AND COMMUNITY INVOLVEMENT

In a society such as ours, where young people are frequently encouraged to be independent and to make their own decisions, it is imperative that the school, the home, and the community cooperate in providing consistent and supportive policies, leadership and messages that guide youngsters rather than confuse or alienate them.

Such underlying causes of drug abuse as stress and anxiety, negative peer pressure, low self-esteem, inability to cope with emotions, and a lack of positive alternatives must be recognized and addressed concurrently in schools, at home, and in the community at large. Plans for action must compliment one another so that the youngster feels a sense of direction and consensus in communications with his or her teachers, parents or support people in the community on questions dealing with drugs or drug-related issues.

The school can take the initiative in bringing together the domains of school, home and community to develop a comprehensive and well-coordinated drug abuse prevention plan. The plan should be based upon a statement of philosophy, which incorporates the following premise:

If our young people have:

- acquired basic concepts regarding health-related matters;
- a positive view of themselves and their ability to exercise a measure of control over their lives;
- family and friends to turn to in times of stress;
- fulfilling and supportive experiences in schools, families, and other social environments;
- experiences in making personal decisions based on their own values, and on the consequences of their behavior...

they are less likely to misuse and abuse drugs.

The success of even the best-planned school program will greatly depend upon the degree of cooperation and support which community, school and parent groups are willing to offer. The greater the amount of parent and community involvement, the more hopeful the school can be that its concentrated efforts will fall on fertile ground. Some specific ideas to insure parent and community involvement are:

1. The district/building Health or Drug Coordinator is primarily responsible for identifying community resources relating to drug abuse. This information should be compiled and made available to school staff.

2. Community agency personnel or other community professionals with an interest in drug abuse prevention should be encouraged to make presentations to the school board, school administrators and other appropriate audiences.

3. A Community Awareness Day: As soon as a district steering committee has been formed and resources have been identified for implementing the program, a Community Awareness Day should be planned. The main purposes of the Community Awareness Day are 1) to receive input from parents and community members regarding their needs, interests and concerns and 2) to establish a solid basis for follow-up meetings and plans involving those persons who are willing to make a commitment to the program. Since this introductory event can be crucial to the eventual success of the program, it must be planned carefully. Appropriate school and community personnel should be identified to present clear, accurate information on school and community drug-related issues and concerns. Roles and responsibilities for drug abuse prevention and education programs and the need for the involvement, cooperation and support of parents and community members must be emphasized. Questions or concerns that attendees are likely to raise should be anticipated, to gain a measure of control over what may be an emotional subject for many. Student representatives should be encouraged to attend to present their views and reactions.

4. Community professionals and parents should be invited to serve on school committees related to policy developmentt, to program, to curriculum development and evaluation, and to materials review.

## THE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM, CONT'D

5. Student activities should extend beyond the classroom into home and community. Student surveys, interviews and research assignments provide ways to relate learning to life experiences. Student-produced audiovisuals, plays, demonstrations, debates, pamphlets, etc. can promote parent and community interest in and support for the program.

6. Parent groups should be enlisted to assist in identifying the needs of parents in the community, in obtaining resources to meet these needs and in getting parents and other community members involved in positive approaches to drug abuse prevention.

7. Parent education should be an integral part of the program. Many approaches can be used: take-home material, neighborhood seminars, adult continuing education classes, parent-child communication seminars and workshops in parenting skills, to name a few.

8. "Back-to-school nights" should be arranged to give parents an opportunity to observe classroom activities and student work related to drug education.

## COMPONENTS OF A COMPREHENSIVE SCHOOL-COMMUNITY DRUG ABUSE PREVENTION PROGRAM

### COORDINATION COMPONENT

### SCHOOL NEEDS

- Program stressing prevention
- In-school coordination
- In-service staff training
- Development of community linkages
- Written policies and procedures, available to the public
- Long-range commitment
- Parent involvement
- Sequential K-12 educational program for all students, as a part of health education
- Inderdisciplinary integration
- Resource center
- Positive modeling
- Materials budget
- Program evaluation
- Supportive health and pupil personnel services
- Counseling for students
- Enforcement procedures for rules and regulations
- Cooperation with police agencies

### COMMUNITY NEEDS

- Greater awareness of school roles and programs
- Public awareness and education programs
- Coordination among agencies
- Programs to develop drug alternatives for potential drug abusers
- Better counseling programs
- Youth volunteer programs
- Apprenticeship opportunities for youth
- Youth groups and youth centers, with planned activities and positive leadership
- Greater involvement of churches, employers and community leaders
- More effective police involvement

### HOME NEEDS

- Parent awareness programs
- Neighborhood seminars
- Parent training in drug abuse prevention
- Communications skills training for parents and their children
- Training for positive parenting
- Parent support groups
- Reinforcement of school learning
- Positive modeling
- Supportive environment

## SOURCES OF HUMAN AND/OR FINANCIAL ASSISTANCE

- School District
- BOCES
- Local Government
- County Groups
- State Government
- Federal Government
- Health and Drug-Related Agencies
- Church Groups
- Service Groups
- Professional Organizations
- Colleges, Universities
- Chamber of Commerce
- Independent Business Groups
- Police Departments

## PHILOSOPHY AND DESIGN OF THE CURRICULUM

The primary focus of the Drug Education Curriculum is prevention of drug misuse and abuse through combined cognitive and affective development. Research has shown that drug education programs which include objectives that enable students to:

- learn credible information;
- improve their self-concepts, (self-images);
- communicate effectively with others; and
- solve problems and make informed, responsible decisions

result in significant reduction of:

- referrals for drug-related activities and absences;
- instances of disruptive behavior among students; and
- instances of school property damage.

Research has also shown that information is a factor which influences values, problem-solving, decision-making and risk-taking behaviors. To influence behavior positively, however, information must be contained within the broader context of affective skills development.

The affective model upon which this curriculum is based has three components: The development of self-image and positive self-concept; the development communication skills; and the development of coping skills.

**The Development of Self-Image and Positive Self-Concepts:** Research demonstrates that young children exposed to affective educational activities and materials, designed to improve self-concept and acceptance of others, significantly improve their self-concepts. Individuals with poor self-concepts are more likely to misuse and abuse drugs than individuals with positive self-concepts. Significant reduction of drug use was also found among students exposed to humanistic education, which includes values clarification and values sharing programs. Current data suggests that values clarification and values sharing exercises have positive outcomes for drug abuse prevention education. The Drug Education Curriculum includes objectives and activities designed to improve self-concept, and acceptance of others. It also implements values clarification and values sharing at all levels.

**Development of Communication Skills:** Skills in effective interpersonal communication enable students to realize a measure of control over their lives and environment. These skills help them to express themselves clearly in a positive and acceptable way, listen actively to others, and share and accept thoughts and feelings as a part of meeting their own needs and those of others. They also help students to bridge communication gaps with parents and other authority figures.

The practice of non-judgmental interaction and sharing has been found to reduce drug use. Sharing thoughts and feelings in a supportive atmosphere enables students to broaden their awareness and acceptance of alternatives to drug use for changing feelings and meeting needs. Assertiveness skills help students resist the pressure of peers to behave in ways that are against their own better judgement. Skills in dealing with stress and pressure can prevent some students from turning to drugs for this purpose. The Drug Education Curriculum includes sequential attention to the development of these skills.

**The Development of Coping Skills: Problem-Solving/Decision-Making.** Research has indicated that problem-solving/decision-making processes can be taught effectively to fifth and sixth graders and that, in considering drug decisions, these students expressed healthy attitudes regarding drug use. One approach to decision-making is the force-field analysis. The force-field analysis has been identified as an effective means of teaching students to focus on pressures operating in a particular environment. The Drug Education Curriculum develops problem-solving/decision-making skills, including the force-field analysis, and integrates activities related to problem-solving/decision-making throughout the program.

**Features of the Drug Education Curriculum:**

1. The curriculum is designed for direct teacher use in the classroom, rather than as a reference document for a local writing committee. Thus it has been printed as nine separate booklets: seven for K-6, one for junior high and one for senior high.

2. The curriculum is a self-teaching and reference document, as well as a teaching guide, which includes background information, descriptions of teaching methods, suggestions for evaluation and the use of community resources and other helps.

3. The curriculum is sequential. While each grade offers a complete grade-level curriculum, following grades build on and reinforce previous grades without repetition beyond what is needed for review.

4. Concepts represent threads of continuity running through the entire K-12 program.

5. Objectives may be grade-specific, may be developed sequentially to build on a previous grade, or may skip one or more grades, then reappear for review or more sophisticated development. Objectives are worded behaviorally and measurably.

6. Few activities are repeated, although similar experiences are provided on several levels. An effort has been made to include alternate activities - basic and more advanced, individual and group, those that require materials or audiovisuals and those that do not - wherever possible, to meet the varying needs of classroom teachers, and their students.

7. Activities requiring films, storybooks or other materials which must be purchased (other than essential references) are designed to be supplementary rather than basic to the curriculum.

8. Of the materials listed for each grade, only a few basic references and soft material supplies are required to implement the curriculum. Worksheets for teacher duplication are included for each grade. Information sheets, story pictures and patterns are also provided.

9. A column at the right-hand side of each curriculum page provides the elementary teacher with a reference for subject integration of material and the Health Coordinator with suggestions for coordinated efforts with teachers of other subject areas at the secondary level.

10. At the end of each concept, a Culminating Concept Evaluation Activity is included to provide the teacher with feedback from students relating to each completed section.

11. A tear-out Evaluation Form at the end of the guide allows the teacher to become a participant in State level assessment and revision of the curriculum.

The district/school Health or Drug Coordinator is primarily responsible for insuring that teacher selection of activities and resources is coordinated sequentially. The district/school Health Education Curriculum Committee may also choose to adapt the curriculum to local needs and resources through Committee selection, in consultation with teachers, of grade level activities and materials.

## CURRICULUM EVALUATION

Evaluation is built into the Drug Education Curriculum, and occurs as the teacher develops a unit as well as at the completion of a unit. During evaluation, information is gathered which focuses on the program, the student's learning and progress, the classroom environment, and the curriculum content. The feedback received can be used to shape the course of study to better suit the needs of teachers and students.

A variety of methods have been used in this Drug Education Curriculum to help gather evaluation data:

1) **The curriculum is designed to be self-evaluative.** Objectives are written in measurable terms and activities are designed so that their completion involves students as active, observable participants. Thus observation of student behavior frequently provides the teacher with a means to assess student progress and goal attainment. Extra support can be provided for those students who experience difficulty with specific activities or in achieving specific objectives.

2) **Record-keeping** is suggested after the development of each concept throughout the curriculum. These records should reflect the progress of the students. Attitudinal learning activities can be augmented for those students who require support in order to achieve the defined behaviors. Teachers are also encouraged to note activities which were received with enthusiasm and those which required further development. The curriculum is personalized and shaped to meet the needs of most teachers and students.

3) **Culminating Concept Evaluation Activities** are included in the curriculum. Cognitive tasks, including paper and pencil activities, are used to evaluate content learning. Question activities are written which require students to respond at different cognitive levels. Questions of knowledge, application interpretation, analysis, and synthesis are used to make the paper and pencil tasks more interesting and viable. Open-ended evaluation sheets for students to complete are also included at each grade level. Students are invited to actively participate in providing feedback about information and activities. In this way, the curriculum is shaped by the students to meet the needs of future students.

4) A tearout **Evaluation Form** is provided at the back of each curriculum booklet. Teachers are asked to fill out this form when they have completed their Drug Education Unit and return it to the Bureau of Drug Education, New York State Education Department. The form solicits the reactions of teachers to the Curriculum Guide and opinions which students provided through evaluation activities in the curriculum. These forms will be used by the Bureau to guide the preparation of future guides.

## EVALUATION REFERENCES

Anderson, Gary L., STADUS (Student Alcohol and Drug Use Survey). Guide Book and Survey Book, Center City, MN: Hazelden Literature, 1979.

Bukoski, William J., "Drug Abuse Prevention Evaluation: A Meta-Evaluation Process." Paper presented at the 4th Annual Conference of the American Public Health Association, New York City, November 4-6, 1979. Rockville, MD: National Institute on Drug Abuse.

Drug Abuse Instrument Handbook. Research Issue 12. Rockville, MD: National Institute on Drug Abuse.

Evaluation In Practice. Rockville, MD: National Institute of Mental Health.

Prevention Resources. Double Issue: Volume IV, Nos. 1 & 2 (Spring and Summer 1980). Rockville, MD: National Institute on Drug Abuse.

Swisher, John D. "An Educational Policy for School Prevention: Rationale and Research." Contemporary Policy Issues, Vol. 4:27-35, 1976.

## TO THE TEACHER: HOW TO USE THIS GUIDE

Each grade level Drug Education Curriculum Guide is divided into three sections: 1) an introductory section, 2) instructional units and 3) appendices.

The **INTRODUCTORY SECTION** provides teachers with necessary background information for the successful implementation of the instructional program. Introductory material is page-numbered with lower case Roman numerals.

The **INSTRUCTIONAL UNITS** include a preliminary materials list and three to four concepts, each with two or more objectives, sequentially arranged, and one or more activities per objective. Accompanying worksheets, illustrations, etc. are contained within the instructional units.

The **APPENDICES** include reference information related to teaching methods, agencies, resources and supplementary guidelines. Each guide contains the same set of appendices.

A **GLOSSARY** of terms is included in grades 5 - Senior High.

It is recommended that teachers use a procedure similar to the following when using this guide:

- Read through the introductory section to gain a thorough understanding of the task to be undertaken, not only within the classroom, but also on a broader scale.
- Scan the instructional units and appendices to get an overview of what they include.
- Identify any weaknesses in personal preparation for teaching basic material and initiate plans to help strengthen these weaknesses.
- Talk to other teachers, staff, etc., to gain perspective on district goals and plans or to stimulate the development of these where they are in need of augmentation or revision.
- Discuss with previous and later-grade teachers, and with the Health Coordinator, the objectives that need emphasis in your particular grade or class, to insure that district priorities are met, that the K-12 program has continuity, that your time is used efficiently and that related subjects are taught in a manner supportive of the curriculum.
- Plan your activity schedule. Determine the time available by reference to district priorities, the total school health curriculum, identification of overlapping objectives with other areas of health and possibilities for integration of material with other subjects.
- Based on the characteristics of the class, the materials available to you and your personal judgement, select the activities you will use from those suggested. Note that each concept includes a Culminating Concept Evaluation Activity at the end. Where this is to be used, students need to be involved in activities that will enable them to perform the required task.
- Meet with the school librarian or resource center supervisor to discuss materials required. Determine if they are already available or if they may be acquired and how long it will take to acquire them. This should be done several months before the materials are needed, as some distributors, such as the National Clearinghouse for Drug Abuse

## TO THE TEACHER: HOW TO USE THIS GUIDE, CONT'D

Information, require some time to respond to orders. Of course, district deadlines for spending must also be considered. If all teachers can consolidate and prioritize their materials requests before submission to a librarian or purchase agent, it will insure fairness, and identification of those materials most important to the program.

Enlist the help of the Healthor Drug Coordinator to identify the resource persons and agencies you will use and call, write or visit them--whichever is most appropriate--to discuss your needs and mutual schedules. This is best done as a cooperative activity of all relevant school staff, coordinated and assisted by the Health Coordinator.

Teachers will recognize many of the concepts and objectives contained in this curriculum as basic to the development of the child and preparation for life and learning in its broadest sense. The goals of positive self-image, self-confidence, self-discipline and self-motivation for students should permeate all school programs and every teaching-learning situation; they should not be seen as "drug education" or "health education" goals alone. They are specifically and purposefully expressed and integrated here, because educational research has demonstrated that drug education programs which focus primarily on content, without adequate attention to motivations and other psychosocial factors, are not effective in preventing drug misuse and abuse. Content-oriented drug education programs may even promote student involvement in the drug scene.

The attitude a teacher conveys makes a deeper and longer-lasting impression on students than all the factual statements in a text or pamphlet. We all teach more by the kinds of people we are than by the teaching we do; no matter what content the teacher is teaching, the student is feeling an emotional response and learning an attitude as well. Experiences gained in a positive, motivating atmosphere produce lasting, positive effects on students. Teacher awareness of these factors can greatly increase the long range effectiveness of any instructional program.

## A SAMPLING OF TEACHING METHODS

The methods you use in drug education will make all the difference between classes that are boring, alienating and ineffective in preventing drug-related problems and classes that will get students actively involved in learning and doing things that will give them the facts they should know to make responsible decisions about drug use, while helping them to develop an understanding of health, motivations and behavior.

A variety of methods will make it easier to adapt to individual differences among students. No one method or procedure is suited to every objective or purpose, i.e. a method that is appropriate in one learning situation may not work in another.

The following teaching methods are offered as a pedagogical assortment from which the teacher may choose and adapt those best suited to his or her talents, the classes taught, and the objectives selected.

### FEELING CIRCLE

The Feeling Circle is particularly useful with elementary pupils. It can be used as a sharing or problem-solving method for the class, a group or an individual pupil. A small group sits in a circle, usually with the teacher as discussion leader, sharing reactions and ideas.

The feeling circle gives the teacher an opportunity for developing pupil skills in self-expression, listening to others, taking turns, attending to and remembering what was said, and learning to think before they speak, among others. Pupils learn, as a result, to express their feelings, needs and ideas in ways that are socially acceptable and thus effective for them.

### BRAINSTORMING

Brainstorming can be used to teach students to respect and build on their own and others' creative abilities and to acquire the experimental frame of mind necessary for effective problem-solving. Brainstorming develops an awareness of a range of possible alternatives, often bringing out some very useful suggestions. An important element of brainstorming is that the students themselves have provided the suggestions: they are active participants in the learning experience.

Brainstorming can be done as a full class or small group activity. The procedure is described below. It is suggested that the teacher introduce the process to students using a simple example, such as the one given in #3.

1. Introduce the topic of brainstorming. It can be described as a first step in problem-solving - a method for getting out the maximum number of ideas for consideration. Emphasize that the only rule is to spill out ideas as quickly as possible, without discussion of your own thoughts or the thoughts of others.
2. Divide the class into random groups of three to five students. Each group should have paper and pencil or pen. Have each group select a recorder.
3. Instruct the groups to think of as many ways as they can to celebrate a birthday. The recorder lists these on the paper.

4. Give the groups ten minutes to record their ideas. (If any groups lose steam ahead of time, encourage them to keep trying).
5. Ask each group to choose its two most important ideas to be shared with the entire class.
6. Post the lists so that everyone can see how many ideas emerged in a short time.
7. Decide which ideas can be put into effect.
8. Select a planning committee to combine ideas.

As a followup to the activity, ask the class the following questions:

1. Was this a good way to get people to listen to your ideas?
2. Were many good ideas expressed?
3. Can you think of other times we might use this method of sharing ideas in the class?

## LECTURE-DISCUSSION

A drug education program that relies heavily on lectures, whether presented by the teacher, an outside resource person or through media, will not be effective in meeting the goals of prevention. When used properly, however, the lecture-discussion method may be the best way to handle a particular objective.

Lecture-discussions may be used to present case studies, hypothetical situations, critical issues or other motivating topics to arouse student interest and set the stage for student activities that follow. Demonstrations may also be included, such as one given by hospital personnel of life-saving techniques. Wherever possible, background information about drugs and drug-related topics should be researched by the students themselves, rather than presented in lecture format by the teacher. The teacher's role is to guide student activity, raise questions and evaluate student progress.

## DISCUSSION

Discussion has several purposes: to develop interest in a new topic; to test understanding, concepts and experiences; to exchange opinions and viewpoints; to develop critical thinking, critical listening, and clear discourse; and to facilitate awareness of misleading, irrelevant, and false statements.

Either the teacher or a qualified student may take the leadership role in initiating and facilitating discussion. The teacher should respect each student's beliefs and encourage the expression of personal opinions, while also encouraging students to listen carefully and thoughtfully to the views of others. The teacher should accept rather than judge statements that are emotionally-based, question erroneous statements and make authoritative references available to the students.

## FISH BOWL

The Fish Bowl is a technique that enables the classroom teacher to create a small group experience without losing the attention of the class. All the students have an opportunity to get involved, have their say, hear how others perceive a situation and decide on a mutually acceptable solution in an orderly, democratic fashion. The procedure for Fish Bowl is as follows:

## A SAMPLING OF TEACHING METHODS, CONT'D

Step 1. The teacher asks for six volunteers to sit in a circle in the center of the class. (Bean bag chairs are especially good for this activity.)
Step 2. A seventh chair is placed within the circle.
Step 3. The rest of the class stands or sits around the outside of the circle and chair.
Step 4. The six volunteers discuss the problem and say whatever they want to say, while the rest of the class listens.
Step 5. A student on the outside who wishes to say something must sit in the empty chair and wait to be recognized by one of the others in the fish bowl. Once recognized, this student can briefly state whatever s/he wants to add, clarify or question, then must vacate the chair for someone else.

Possible class problems that could be solved using this activity include cheating, stealing, loyalty, breaking rules, and interfering with the rights of others.

## PROBLEM-SOLVING/CONFLICT RESOLUTION

Learning to resolve a conflict situation between individuals, an individual and a group, or between groups, without sacrificing one's identity, self-respect or control over one's life can be one of the most important life skills anyone can learn. To arrive at a solution to a conflict that is mutually agreeable and allows everyone involved to feel satisfied, one must learn how to communicate without demeaning another. The problem-solving methods described below can be used in any conflict situation to help acquire decision-making skills.

### Traditional Model for Problem-Solving:

Step 1. State the Problem: Participants state the problem as they see it and how they feel about it without blaming, criticizing, judging or shaming.
Step 2. Define the Specifics of the Problem: Participants then note the points of agreement and disagreement.
Step 3. Brainstorm All Possible Solutions: Participants contribute as many ideas as possible to how the conflict may be resolved, to create awareness that there may be a number of ways to deal with the problem.
Step 4. Identify the Consequences: Participants select the most suitable situations from the list they brainstormed and outline the consequences of each.
Step 5. Choosing a Solution: Finally, participants evaluate suitable solutions and consequences and agree on one solution that is acceptable to all.

### Force-Field Analysis Model:

Another process that can be used in conflict resolution is the force-field analysis. In any conflict situation there are opposing forces. Some of these forces help an individual to move toward a desired goal. Other forces may interfere with goal attainment. In a force-field analysis, the individual analyzes the forces that are operating, examines advantages and disadvantages of courses of action, evaluates them, and decides whether or not to pursue the goal. The steps in using the force-field analysis include:

Step 1. Divide a piece of paper into four columns.
Step 2. In the first column, write the conflict or problem which exists.
Step 3. In the fourth column, write the goal that you wish to reach.
Step 4. In the second column, list the forces (advantages) which operate to support goal attainment.
Step 5. In the third column, list the forces (disadvantages) which operate to interfere with goal attainment.
Step 6. Identify the consequences of each advantage and disadvantage.
Step 7. Evaluate the advantages and disadvantages in terms of gains and risks.
Step 8. Choose a plan of action that includes goal attainment, rejection of the goal, or changes in the goal as originally stated.

## ROLE-PLAYING

Students assume different roles and improvise dialogue as they act out a problem situation. Role-playing provides an excellent method for helping students learn about their own attitudes and behaviors and find new ways of dealing with problems. As a followup to a role-playing activity, discuss what occured in the role-play and how everyone felt about the interactions. This method may be used in small groups, or with one small group role-playing before the class.

## DRAMATIZATION

Students act out stories, dramas, skits or situations written by a teacher, student or author. Dramatization is used to illustrate how other people have dealt with different problems or situations. As a followup to this activity, discuss what happened, student reactions and what they might have done differently from the characters in the drama. This method is best used as a supplement to other forms of instruction and should be selected and evaluated on the basis of its educational potential, not its entertainment value.

## PLAYS AND STORIES

A group writing project may include an entire class. Students should be given a pertinent theme; the play or story should teach a concrete lesson in a practical situation. Acting out the plays or stories provides additional experiences geared toward the learning goals. Plays and stories may be enhanced by being open-ended, allowing students to provide alternative answers or endings.

## SENTENCE STEMS

Sentence stems are found in a number of places in the curriculum, but may also be created by the teacher or by students. The purpose of a sentence stem is to draw out a reaction, facilitating self-expression and communication. Sentence stems may be used as discussion starters; to increase awareness of individual similarities and differences; or to obtain class reactions to activities, events, etc. A very useful sentence stem for evaluation of a curriculum activity is the "I learned..." statement, which students may complete at the end of the activity.

## A SAMPLING OF TEACHING METHODS, CONT'D

### RESEARCH

All students need to learn the skill of accessing accurate, reliable information as a basis for making decisions throughout life. While research activities should not become a major focus of the curriculum, it is necessary for students to learn where to go to obtain information on a topic, how to interpret what they read (or hear), and how to communicate to others what they have learned. Research activities should make students aware of a broad range of information sources - community and government agencies, people with specific expertise, newspapers, government reports, journals, books, pamphlets, television and encyclopedias. The information students obtain can be shared through oral or written reports, discussions or student-constructed visuals.

### INTERVIEWS

Interviews are a learning technique in which a small number of selected individuals are questioned on a specific topic. Since the purpose of an interview is to obtain, record and report opinions and information accurately, students learn social and communication skills through this process. Where interviews involve family or friends, students frequently gain insights regarding human behavior which they may not have obtained in less-controlled circumstances.

Teacher direction and asistance may be necessary to help students form clear, unbiased and relevant questions for their interviews, and interpret objectively the information obtained.

### SURVEYS

Individuals, committees, or the entire class may conduct surveys. Each step in planning and carrying out a survey has potential educational value. Ideally, a survey should lead to action if the results show that action is needed. This ideal may not always be realizable in the classroom situation, but awareness of community needs is at least sharpened. A survey involves preplanning, collecting, analyzing, interpreting and evaluating data and reporting the findings to the class.

The teacher's role is to guide the students so that they will secure the information they are seeking and interpret and evaluate it correctly. If oral or written questionnaires are used, the teacher's help may be needed to ensure clarity and ease of administration and tabulation. When community facilities are visited, proper prearrangements should be made and a follow-up thank-you letter sent. If students plan to evaluate their findings, care should be taken that the criteria used are sound.

(Note: If a sophisticated study is planned, it is suggested that teachers use school and/or community expertise in sampling, analyzing and interpreting information.)

### EXPERIMENTS AND DEMONSTRATIONS

Experiments may be performed by students or demonstrated to the class by the teacher or a resource person. Preplanning for experiments includes: making scientifically sound selections that are in line with the purpose of the lesson and with the maturity of the students; obtaining necessary materials and equipment; and anticipating questions about the results. These activities should be coordinated with the science program to prevent duplication.

## SELF-CONSTRUCTED VISUAL AIDS

Aside from providing a useful outlet for creativity and originality, self-constructed visual aids enliven instruction and help clarify, simplify, emphasize, interpret, and reinforce learnings. Symbolic representation of data may be used through charts, tables, diagrams, maps, graphs, posters, cartoons, diagrams, mobiles, and combinations of these. Charts, tables, graphs, and maps are effective in disseminating information in a compact form while posters and cartoons, by their potential emotional impact, justify their use in the classroom because of their potential influence on attitudes. Student-constructed visuals may also play a major role in reinforcing the program outside classroom walls, obtaining needed community support for the program.

## LEARNING CENTERS

Grades 2-6 of the Drug Education Curriculum each contain a set of learning center activities.

A learning center consist of a series of child-centered stations, each of which develops skills and knowledge around a specific topic. Students are active, independent learners as they work through interesting activities prepared for them at their level.

Every learning center has the following elements:

1. Name reflecting the topic of the center.
2. An attractive attention-getting, visual presence.
3. Tasks written on activity cards in a clear, concise manner explaining to the students what they will do and how they will do it.
4. Materials needed for the tasks.
5. An evaluation and record-keeping system to monitor pupil progress.

The learning center can be constructed on a bulletin board, or separate tables can be used as task centers. At least one table is necessary to hold resource materials, task-related materials, and completed projects.

Students can work through learning centers independently or in groups. Students may complete all tasks, or just certain tasks, depending on the directions given by the teacher. They may work at a center during an assigned time or whenever they have free time. The methodology is flexible and can be readily adapted to suit the needs of students and teacher.

## TOPICAL OUTLINE OF THE DRUG EDUCATION CURRICULUM, K-12

In the outlines presented on the following pages, Roman numerals represent topics addressed by curriculum concepts and letters represent the topics addressed by objectives under these concepts. The purpose here is to give an overview of the major topics and their sequence in the curriculum, rather than an outline of concepts and objectives, making quick reference and comparisons relatively easy.

### KINDERGARTEN

I. Self-Image, Feelings and Tolerance
  A. Identifying and expressing feelings
  B. Ways we are each unique
  C. Ways we are the same
  D. Accepting feelings of others
II. Group Membership
  A. Family membership
  B. Responsibilities toward family members
  C. Group participation
  D. Need for rules
III. Responsibility for Health
  A. Safe vs. unsafe things to eat
  B. Health helpers
  C. Health decisions

### GRADE ONE

I. Self-Image and Communication Skills
  A. Expressing uniqueness
  B. Identifying situations that make us feel important
  C. Recalling and sharing success experiences
  D. Sharing and accepting feelings
  E. Sharing and accepting decisions
II. Responsibility for Feelings and Actions
  A. Responsibility for feelings
  B. Identifying uncomfortable feelings
  C. Handling unpleasant situations
III. Making Healthy Decisions
  A. Safe use of substances
  B. Recognizing poisons
  C. Rules regarding dangerous substances
  D. Making healthy choices

### GRADE TWO

I. Making Choices to Meet Needs
  A. Needs vs wants
  B. Forming habits
II. Self-Image, Social Interactions and Responsibility
  A. Responsibility for feelings and actions
  B. Family membership and support
  C. Class membership and support
  D. Solving classroom problems
  E. Importance of classroom rules
  F. Setting rules and determining consequences for breaking rules
III. Body Balance and Health
  A. Definition of balance
  B. Feeling body balance
  C. Body parts and functions
  D. Maintaining a healthy body
IV. Wise Use of Substances
  A. Identifying well vs sick feelings
  B. Definition of medicine
  C. When to take medicine
  D. Persons from whom we should take medicine
  E. Rules for taking medicine

## GRADE THREE

- I. Self-Image and Responsibility for Decisions
  - A. Improving our own self-images
  - B. Feelings about success
  - C. Risk-taking, alternatives and consequences
  - D. Changing decisions
- II. Group Dynamics
  - A. Speaking and listening in groups
  - B. Supporting group members
  - C. Ways of solving group problems
  - D. Making a group decision
- III. Body Balance and Health
  - A. Body systems and functions
  - B. Relating body balance to internal and external body environments
  - C. Feelings which affect balance
- IV. Assuming Personal Responsibility for Health
  - A. Habits affecting present and future health
  - B. Importance of assuming personal responsibility for health
  - C. Setting personal goals for protecting health

## GRADE FOUR

- I. Appropriate Uses for Drugs
  - A. Definition of "drug"
  - B. Differences among prescription, over-the-counter and illegal drugs
  - C. Medical uses for drugs
  - D. Prescriptions
  - E. Labels
  - F. The pharmacy
  - G. Comparing contemporary medications with past medications
- II. How Emotions Affect Health
  - A. Awareness of emotions
  - B. Feelings that bring discomfort
  - C. Sickness as a means of dealing with problems
  - D. Ways to change emotions
- III. Communication Skills and Problem-Solving
  - A. Practice communication skills
  - B. Responsibility for feelings
  - C. Practice problem-solving
  - D. Risk-taking, consequences and alternatives
  - E. Solving dilemmas
- IV. Setting Personal Health Goals
  - A. Importance of learning facts before making decisions
  - B. Identifying habits hazardous to health
  - C. Importance of valuing health
  - D. Setting personal goals and recording progress

# TOPICAL OUTLINE OF THE DRUG EDUCATION CURRICULUM, K-12, CONT'D

## GRADE FIVE

I. Drug Use and Body Balance
  A. How various categories of drugs affect body balance
  B. Differentiating use, misuse and abuse of drugs
  C. The cycle of dependency and tolerance
  D. Reasons for substance misuse and abuse
II. Drugs and Society
  A. General advertising techniques
  B. How advertising influences drug-buying
  C. Techniques used to sell drug products
  D. Prevalence of drug use
III. Problem-Solving and Decision-Making
  A. Comparing and choosing techniques
  B. Implementing decisions assertively
IV. Group Dynamics
  A. Friendships
  B. Peer groups
  C. Dependency needs
  D. Listening skills in group situations

## GRADE SIX

I. Drugs and Human Needs
  A. Valid sources of information
  B. Psychoactive drug classifications
  C. Marijuana (Learning Center)
  D. Relationship of needs to substance abuse
II. Personal Decisions Regarding Drug Use
  A. Relating maturity to ways of handling feelings
  B. Feelings and attitudes affect decisions
  C. Evaluating decisions regarding psychoactive drug use
  D. Double standards
  E. Setting personal goals for maintaining health
III. Drugs and Society
  A. Substance use and alternatives in managing daily problems
  B. Substance misuse and abuse as concerns of society
  C. Controls on the purchase, possession and use of substances
IV. Alternatives to Drugs
  A. Mood changes as a part of everyone's life
  B. Identifying things to help us feel good
  C. Risk-taking, consequences and alternatives
  D. School and community resources

# TOPICAL OUTLINE OF THE DRUG EDUCATION CURRICULUM, K-12, CONT'D

## JUNIOR HIGH

- I. Maintaining the Homeostasis of the Body
  - A. Environmental factors
  - B. Psychoactive drugs
  - C. Prescription and over-the-counter drugs
  - D. Drugs and pregnancy
- II. Drugs and Society
  - A. Advertising and drugs
  - B. Legal aspects of substance use, misuse and abuse
- III. Motivations for Drug Use
  - A. Individual reasons for using or abusing drugs
  - B. Progression from experimentation to abuse
  - C. Effects on performance
  - D. Reasons for continued drug use by individuals
  - E. Constructive alternatives
- IV. Communication Skills
  - A. Importance of clear communication
  - B. Practice communicating feelings and needs
  - C. Practice listening and receiving messages
  - D. Dynamics of peer pressure and drug use

## SENIOR HIGH

- I. Effects of Drugs on the Homeostasis of the Body
  - A. Major classes of drugs (review)
  - B. Effects of drugs on the neuron and the brain
  - C. Tension and body balance
  - D. Substance use and body balance
  - E. Drug interactions
  - F. Drug dependence, tolerance and withdrawal
  - G. Drugs and driving
  - H. Drugs and pregnancy
- II. Drugs and Society
  - A. History of drug use
  - B. Relationships among industry, controls and society
  - C. Social policies regarding drug use
  - D. Effects of drug abuse on society
  - E. Viewpoints
- III. Communication Skills:
  - A. Stating feelings and needs constructively
  - B. Communication dynamics in groups
  - C. Communication dynamics in relationships
  - D. Effects of substance abuse on relationships
- IV. Motivations and Alternatives
  - A. Changing moods and feelings
  - B. Identifying alternative activities
  - C. Dealing with distress and pressure
  - D. Practice solving problems
  - E. Decisions influencing life style and life span
  - F. Developing a life-long model for health
  - G. Identifying sources of help and support in the community

# ADOLESCENCE

Adolescence is considered to be the transitional period between childhood and young adulthood. Sexual maturity, which occurs during puberty, is accompanied by marked changes in behaviors and social interests. The peer group gains new significance in daily life. Interests, related to personal appearance, social activities, education and future vocation, develop. As the adolescent moves toward maturity and independence, a need for privacy grows. Dating occurs and relationships develop. Family interaction may become difficult as adolescents disagree with authority figures over varying standards of behavior.

The adolescent needs people who understand, legitimize and respect the feelings and ideas being experienced. Filled with energy and exuberance, and searching for an identity, the adolescent seeks out individuals who are flexible, open and trustworthy, and who help to bring form and direction to life. Numerous self-images and behaviors will be accepted, tested and rejected by the adolescent. In the process of finding affection, acceptance and achievement, adults can impart to adolescents the sense that life is meaningful, and that each individual has worth.

## DEVELOPMENTAL TRAITS OF 12-14 YEAR OLDS (JUNIOR HIGH)

### DRIVES AND INTEREST IN THE OPPOSITE SEX MAY CAUSE TENSION AND ANXIETY

- Personality adjustment problems increase.
- Growth patterns contribute to worry and anxiety.
- An air of sophistication is often assumed to cloak feelings of bewilderment, confusion, and insecurity.

### EXPERIMENTATION WITH DIVERSE PERSONALITY ROLES IN AN ATTEMPT TO IMPROVE STATUS

- Status with peers becomes more important than adult approval.
- Great satisfaction is gained from individual accomplishments which are recognized by the group (likely to try to accomplish those things that give some claim to distinction or uniqueness).
- Codes of behavior may be set up to challenge or imitate adult standards.
- Social behavior is imitated, especially as portrayed by television, motion pictures, and magazines.
- A strong search for identification and development of a good self-image come to the fore.

### INCREASING CONCERN IS SHOWN OVER RESOLVING ONE'S "LIFE" PROBLEMS

- Sporadic and sometimes intense interest shows in certain aspects of health. (Some early-teens place special value on physical strength and skills, others on personal attractiveness.)
- Vacillation occurs between over-confidence in one's ability to take care of one's supposed or anticipated health needs and actual ability to cope with one's specific health needs.
- Extreme curiosity develops about the details of physical illness.

# DEVELOPMENTAL TRAITS OF 15-18 YEAR OLDS (SENIOR HIGH)

## DRIVES AND INTEREST IN THE OPPOSITE SEX CAUSE TENSION AND ANXIETY

- Adolescents have sustained and/or are experiencing marked physical growth that may create coordination problems, resulting in awkwardness.
- Changes in physical appearance and acne or other health problems often augment anxiety over appeal to the opposite sex.
- Adolescents in this age group show heightened concern about sex roles and relationships with the opposite sex.

## EXPERIMENTATION WITH DIVERSE PERSONALITY ROLES IN AN ATTEMPT TO IMPROVE STATUS

- Adolescents exist in a nether world between childhood and adulthood. Their desire for independence leads them to periodically venture into adult patterns of behavior, then, when things go wrong, retreat into a child's role.
- The company of friends is preferred to that of family, although relationships with family may be better than in early adolescence. Peer group acceptance is sought through conformity.
- Adolescents often experience exaggerated concern over whether they are "normal." They need to share feelings and reactions with others for reassurance.
- Better control is exercised over emotions, and the views and feelings of others are more often considered.
- A conscious seeking of identity results in a clearer definition of self and increased consistency in behavior.

## INCREASING CONCERN IS SHOWN OVER RESOLVING ONE'S "LIFE" PROBLEMS

- Adolescents tend to make unrealistic assessments of their own competence. The pressure for upward mobility frequently leads economically secure majority-group adolescents to overestimate their potential in terms of vocational aspirations. Minority group and low-economic group adolescents, on the other hand, often underestimate their potentials.
- Decisions are more frequently made, and actions taken, on the basis of personal and peer group values and less frequently motivated by rebellion against authority.
- Other adolescents, while they still live in the present, are becoming more future-oriented, developing concerns and/or plans relating to work or occupations.

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## SENIOR HIGH

## MATERIALS LIST

**TEACHER REFERENCES:** The following references provide further background and/or additional activities. It is expected that this suggested list will be modified by teachers as they work with the curriculum. Prices are subject to change.

### DRUG EDUCATION:

Fornaciari, Suzanne. How to Talk to Kids About Drugs. Bethesda, MD: Pacific Institute for Research and Evaluation, 1980. $2.50. (Recommended.)

Girdano, Daniel A. and Dorothy Dusek. Drug Education Content and Methods (Third Edition). Reading, MA: Addison-Wesley Publishing Company, 1980. $9.95.

Hill, Reba M. and Leo Stern. "Drugs in Pregnancy: Effects on the Fetus and Newborn." Reprint from Drugs, Vol. 17, No. 3. White Plains, NY: March of Dimes Birth Defects Foundation, March, 1979. Free.

Ray, Oakley. Drugs, Society and Human Behavior (Second Edition). St. Louis, MO: C.V. Mosby, 1978. $14.50. (Recommended.)

### AFFECTIVE EDUCATION:

Gordon, Thomas. Teacher Effectiveness Training. New York: David McKay Publishing Co., 1975. $9.95.

Hawley, Robert C. and Isabel L. Hawley. Developing Human Potential (Activities for Personal and Social Growth, Vols. I & II). Amherst, MA: Educational Research Associates, 1977. $5.95 each volume.

Simon, Sidney, Leland W. Howe and Howard Kirschenbaum. Values Clarification: A Handbook of Practical Strategies for Teachers and Students (New Revised Edition). New York: A&W Publishers, Inc., 1978. $6.95.

Stanford, Gene. Developing Effective Classroom Groups: A Practical Guide for Teachers. New York: A & W Publishers, Inc., 1977. $6.95.

Raths, Louis E., Merrill Harmin and Sidney B. Simon. Values and Teaching (Second Edition). Columbus, OH: Charles E. Merrill Publishing Company, 1978. $8.95.

**SOURCES OF PAMPHLETS:** It is suggested that the teacher (or school librarian) contact the following sources for current information on available materials about three months in advance. Some sources offer free materials, others require payment to cover printing, handling and mailing costs.

Addiction Research Foundation, 33 Russell Street, Toronto, Ont., Canada M5S 2S1. ("Coffee, Tea & Me;" "Fact Sheet Series").

Bureau of Public Affairs, U.S. Department of State, Washington, DC 20520. ("It Was Such A Little Amount").

Channing L. Bete Co., Inc., 45 Federal Street, Greenfield, MA 01301. (Low Reading Level Scriptographic Pamphlets: "About Stress;" "About Depression;" "About Drug Abuse;" others.)

SOURCES OF PAMPHLETS, CONT'D:

Do It Now Foundation, P.O. Box 5115, Phoenix, AZ 85010. ("Alcohol/Drug Interactions;" "All About Cocaine;" "Facts About Angel Dust;" "Substance Use and Safety;" "Tranquilizers;" "Quaaludes & Sopors").

Drug Enforcement Administration, U.S. Dept. of Justice, Washington, DC 20537. ("DEA Fact Sheet;" "Drugs of Abuse").

Food and Drug Administration. Contact your district office. ("Drugs and Driving;" "Drugs and Pregnancy;" "Food and Drug Interactions;" "Drug Effects Can Go Up In Smoke;" "Inhalants: Quick Route to Danger.")

March of Dimes Birth Defects Foundation. Contact your local chapter. ("D*A*T*A*").

National Clearinghouse for Drug Abuse Information, 5600 Fishers Lane, Rockville, MD 20857. ("Drugs and Driving;" "Inhalants;" "PCP;" "Cocaine;" "What Do They Call It Again?").

National Dairy Council, 6300 N. River Road, Rosemont, IL 60018. ("Diet-Drug Interactions," Reprint from Dairy Council Digest, Vol. 48, No. 2).

Pharmaceutical Manufacturers Association, 1155 Fifteenth Street, N.W., Washington, DC 200005. ("Questions and Answers About the U.S. Prescription Drug Industry;" "A Search for Answers.")

SUPPLEMENTARY REFERENCES: Many of the following books are written to general audiences, but are also suitable for use by high school students. Some will be required to complete specific activities in the curriculum; others will enrich the program when made available to students to read on their own. It is suggested that the teacher share the list with the school librarian, indicating those desired for review for possible use in the classroom and those which could be added to the regular library collections.

Abel, Ernest L. Marijuana. The First Twelve Thousand Years. New York: Plenum Press, 1980.

Benowicz, Robert J. Non-Prescription Drugs and Their Side Effects. New York: Grosset & Dunlap, 1977.

Boeckman, Charles. Surviving Your Parents' Divorce. New York: Franklin Watts, 1980.

Booher, Dianna Daniels. Coping When Your Family Falls Apart. New York: Julian Messner, 1979.

Bower, Sharon Anthony and Gordon H. Bower. Asserting Yourself: A Practical Guide for Positive Change. Reading, MA: Addison-Wesley Publishing Company, 1976.

Buckalew, M.W., Jr. Learning to Control Stress. New York: Richards Rosen Press, Inc., 1979.

Clarke, Kenneth S., Editor. Drugs and the Coach. Washington DC: AAHPERD Publications, 1977.

Cox, Tom, Stress. Baltimore, MD: University Park Press, 1978.

Donlan, Joan. I Never Saw the Sun Rise: The Diary of A Chemically Dependent Teenager. Minneapolis, MN: CompCare Publications, 1977.

Dusek, Dorothy and Daniel A. Girdano. Drugs: A Factual Account. Reading, MA: Addison-Wesley Publishing Company, 1980.

Editors of Consumer Reports. The Medicine Show (Fifth Edition). New York: Pantheon Books, 1980.

Evans, Wayne O. and Jonathan O. Cole, M.D. Your Medicine Chest. Boston, MA: Little, Brown and Company, 1978.

Furst, Peter. Hallucinogens and Culture. San Francisco, CA: Chandler & Sharp, 1976.

Gardner, Sheldon and Gwendolyn Stevens. The Care and Cultivation of Parents. New York: Julian Messner, 1979.

Girdano, Daniel and George Everly. Controlling Stress and Tension. Englewood Cliffs, NJ: Prentice-Hall, Inc., 1979.

Gnagey, Thomas D. How to Put Up With Parents: A Guide for Teenagers. Ottawa, IL: Facilitation House, 1975.

Hafen, Brent Q. and Brenda Peterson. Medicines and Drugs: Problems and Risks, Use and Abuse. Philadelphia, PA: Lea and Febiger, 1978.

Harmin, Merrill. Better Than Aspirin: How To Get Rid of Emotions That Give You a Pain in the Neck. Niles, IL: Argus Communications, 1976.

Harris, Sidney. Negative Criticism and What You Can Do About It. Niles, IL: Argus Communications, 1978.

Harrison, Phyllis Anne, M.D. Getting It Together: A Psychology Book for Today's Problems. New York: Globe Book Co., Inc., 1973.

Janeczek, Curtis L. Marijuana: Time for A Closer Look. Columbus, OH: Healthstar Publications, 1980.

Laiken, Deidre S. and Alan J. Schneider. Listen to Me, I'm Angry. New York: Lothrop, Lee & Shepard, 1980.

Little, Bill L. This Will Drive You Sane. Minneapolis, MN: CompCare Publications, 1977.

Loeb, Robert H., Jr. Your Legal Rights As A Minor (Revised Edition). New York: Franklin Watts, 1978.

Long, James W., M.D. The Essential Guide to Prescription Drugs. New York: Harper & Row, Publishers, 1980.

Marijuana and Health. Eighth Annual Report to the U.S. Congress. Rockville, MD: National Institute on Drug Abuse, 1980.

Meyer, Carolyn. The Center: From A Troubled Past to A New Life. New York: Atheneum, 1979. (novel).

National Institute on Drug Abuse. A Woman's Choice (Deciding About Drugs). Rockville, MD: National Clearinghouse for Drug Abuse Information, 1979.

National Institute of Mental Health. "Your Community Mental Health Center & You." Washington, DC: Superintendent of Documents (SN 017-024-00932-6), 1979.

Olshan, Neal and Julie Wang. Fears and Phobias, Fighting Back. New York: Franklin Watts, 1980.

Packer, Kenneth L. and Jeannine Bower. Let's Talk About Drugs, Alcohol and Tobacco. Fairfield, NJ: Cebco Standard Publishing, 1980. (low reading level textbook supplement).

Physicians' Desk Reference. Address orders to: Physician's Desk Reference, Box 58, Oradell, NJ 07649. Revised annually.

Powell, John S. J. Why Am I Afraid to Tell You Who I Am? Niles, IL: Argus Commuinications, 1969.

Richards, Arlene & Irene Willis. How To Get It Together When Your Parents are Coming Apart. New York: Bantam Books, Inc., 1976.

Robe, Luce Barry. Just So It's Healthy. Minneapolis, MN: CompCare Publications, 1977.

Satir, Virginia. Your Many Faces. Millbrae, CA: Celestial Arts, 1978.

Schultes, Richard Evans. Hallucinogenic Plants. New York: Western Publishing Co., Inc. (Golden Press), 1976.

Selye, Hans. Stress Without Distress. New York: J.B. Lippincott Company, 1974.

Shedd, Charles. You Are Somebody Special. New York: McGraw-Hill Book Company, 1978.

Strasser, Todd. Angel Dust Blues. New York: Coward, McCann & Geoghegan, Inc., 1979. (novel).

Ulene, Arthur. Feeling Fine. New York: Ballantine Books, 1977.

U.S. Department of Transportation. Marijuana, Other Drugs and Their Relation to Highway Safety (A Report to the Congress). Washington, DC: National Highway Traffic Safety Administration, December 1979.

Wegscheider, Don. If Only My Family Understood Me. Minneapolis, MN: CompCare Publications, 1979.

Youthbook. Citizens Committee for New York City, 3 W. 29th Street, New York City 10001. (A description of 315 programs and resources for community use.)

## SUPPLEMENTARY INSTRUCTIONAL AIDS:

### WORKBOOKS AND SPIRIT MASTERS FOR DEVELOPING COPING SKILLS:

Churchill, E. Richard and Linda R. Churchill. Managing Yourself. Portland, ME: J. Weston Walch, 1977. $16.95. (48 spirit master activities).

Dewey, Margaret. My Problem Is... Portland, ME: J. Weston Walch, 1980. $3.95.

McVey & Associates, Inc. Follett Coping Skills Series. "Finding Work;" "Budgeting;" "Using Community Resources;" "Getting Medical Assistance." Chicago, IL: Follett Publishing Co., 1977. $7.20/4 titles: Teacher's Guide. $1.20. Low reading level: 3.5.

Storin, Diane and Elaine Walling. PAL Life Competency Program. ("Getting Help;" "Keeping Fit;" "It's the Law;" and other titles). Columbus, OH: Xerox Education Publications, 1980. $1.35 each.

### FILMS:

"Born Hooked." March of Dimes Birth Defects Foundation. Free loan. Contact your local chapter. (See Appendix F). Orders should be placed at least two months in advance to insure timely delivery.

"PCP - You Never Know," 16mm, color, 15 min. Churchill Films, 662 North Robertson Blvd., Los Angeles, CA 90069. 1979.

"Psychoactive," 16mm, color, 29 min. Pyramid Films, Box 1048, Santa Monica, CA 90406, 1976.

"Up Pill, Down Pill," 16mm color, 23½ min. BFA Educational Media, 2211 Michigan Avenue, Santa Monica, CA 90404, 1970.

## FILMSTRIPS:

"The Addictive Personality: Who Uses Drugs and Why?" Filmstrips (2), cassettes or records, teacher's guide. Human Relations Media, 175 Tompkins Avenue, Pleasantville, NY 10570, 1979.

"Adolescent Conflict: Parents vs Teens." Filmstrips (2), cassettes or records, teacher's guide. Sunburst Communications, Room G, 39 Washington Avenue, Pleasantville, NY 10570, n.d..

"Angel Dust: The Nightmare Trip." Filmstrips (2), cassettes or records, teacher's guide. Audio Visual Narrative Arts, Inc., Box 9, Pleasantville, NY 10570, 1978.

"Becoming Responsible." Filmstrips (2), cassettes or records, teacher's guide. Human Relations Media, 175 Tompkins Avenue, Pleasantville, NY 10570, 1978.

"Cocaine: The High-Class High." Filmstrips (3), cassettes or records, teacher's guide. Audio Visual Narrative Arts, Inc., Box 9, Pleasantville, NY 10570, 1978.

"Dealing With Stress." Filmstrips (2), cassettes or records, teacher's guide. Sunburst Communications, Room G, 39 Washington Avenue, Pleasantville, NY 10570, 1976.

"The Gentle Art of Saying No." Filmstrips (3), cassettes or records, teacher's guide. Sunburst Communications, Room G, 39 Washington Avenue, Pleasantville, NY 10570, 1979.

"High On Life." Filmstrips (2), cassettes, records, teacher's guide. Guidance Associates, Inc., Communications Park, Box 3000, Mount Kisco, NY 10549, n.d.

"Life Goals: Setting Personal Priorities." Filmstrips (3), cassettes, teacher's guide. Human Relations Media, 175 Tompkins Avenue, Pleasantville, NY 10570, 1976.

"Life Skills: Alcohol and Other Drugs." Filmstrips (4), cassettes, teacher's manual, worksheets, tests, exercises. Society for Visual Education, Inc., 1345 Diversey Parkway, Chicago, IL 60614, 1980.

"Marijuana Bulletin: A Research Update." Filmstrip, cassette or record, teacher's guide. Sunburst Communications, Room G, 39 Washington Avenue, Pleasantville, NY 10570, 1980.

"Now Hear This: Becoming A Better Listener." Filmstrips (4), cassettes or records, teacher's guide. The Skills Group of The Center for Humanities, Inc. Two Holland Avenue, White Plains, NY 10603, n.d.

"Who Can Help You: Using School and Community Resources." Filmstrips (2), cassettes or records, Discussion Guide. Guidance Associates, Inc., Communications Park, Box 3000, Mount Kisco, NY 10549, 1974.

## SOUND-SLIDE PROGRAM:

"Keeping Cool: How to Deal With Stress." 160 slides in 2 carousel cartridges; cassettes or records, teacher's guide. The Center for Humanities, Inc., Communications Park, Box 1000, Mount Kisco, NY 10549, 1975.

## VIDEOTAPE SERIES:

On the Level. Suggested titles: "Journey Through Stress;" "Alternate Route;" "Face to Face;" "Surrounded;" "Behind the Scenes." Teacher's Guide. Bureau of Mass Communications, New York State Education Department. Available free on tape supplied by the school district. Send for ordering instructions. 1980.

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **OBJECTIVE**<br>The students will review and discuss the major classes of drugs. | ACTIVITY 1. Drug Mythology<br>a. Writing<br>Present the major drug classifications to the students. List several drugs under each classification. Have the students write a brief paragraph on each of the various drugs, listing what they believe to be the physical and psychological effects of the drug. Collect and keep these paragraphs. | References:<br>Drugs: A Factual Account by Dorothy Dusek and Daniel A. Girdano<br>Drugs, Society and Human Behavior by Oakley Ray<br>Medicines and Drugs by Brent Q. Hafen and Brenda Peterson | English<br>Biology<br>Chemistry |
| **TEACHER INFORMATION**<br>It is recommended that the teacher meet with the visitor in advance to discuss what is expected and what questions students are likely to ask. | b. Discussion and Interview<br>Invite a pharmacist or physician to lead a class discussion on the differences among the major classes of drugs. Allow the students to interview the resource person about various drug effects. | Resource Person:<br>Pharmacist or physician | |
| A resource person is suggested here to add a personal element to the program. However, a film or research activity could also be used. | c. Evaluation<br>Return to the students the paragraphs which were written as part of the first step in this activity. Have the students evaluate the paragraphs in terms of the new information they received from the pharmacist or physician. Invite the students to share "I learned.." statements. | | |
| Major Drug Classifications:<br>Narcotics (Opiates)<br>Depressants<br>Antidepressants<br>Stimulants<br>Hallucinogens<br>Cannabis<br>Inhalants | ACTIVITY 2. Drug Classifications (Research & Report)<br>a. Divide the class into groups to represent each of the major drug classifications. Assign to each group two or three specific drugs which fall under the classification. Ask each group to prepare an identification of the drugs assigned, including:<br>- color identification of drug<br>- action of the drug<br>(Cont'd on next page.) | Examples of Student References:<br>"Coffee, Tea & Me," "Fact Sheet Series" (Addiction Research Foundation)<br>"Drugs of Abuse," July 1979 issue of Drug Enforcement (Drug Enforcement Administration)<br>Marijuana: Time for A Closer Look by Curtis L. Janeczek | Biology<br>Chemistry |

CONCEPT: Drugs affect the homeostasis of the body.

OBJ. & TEACHER INFO.

LEARNING ACTIVITIES

RESOURCES

SUBJECTS FOR COORDINATION

## TEACHER INFORMATION

Marijuana, for example, varies considerably in the percentage of THC it contains. The wild marijuana used most often in the 60's contained only about .2% THC. Today's cultivated varieties may contain up to 7% THC. Marijuana may be adulterated with PCP, LSD, hashish oil or other potent chemicals. It may also have been sprayed with paraquat, a poisonous weed killer.

Less obviously identified drugs may be substituted with another substance. Caffeine, for example, may be substituted for amphetamines.

ACTIVITY 2. (cont'd)

- use and dosage
- possibility of dependency and tolerance
- likelihood of abuse
- street name for drug

Have the students report their findings to the class by preparing a one page information sheet for each specific drug assigned to them. Reproduce the worksheets for the class. In this way, each student will have an information folder containing drug classifications with profiles on specifically assigned drugs.

b. Discuss with students that knowing how to identify a drug by its appearance is not enough where illegal or "street" drugs are concerned. Since there is no quality control, these drugs may be "cut" with other drugs or materials, may contain impurities or other poisonous chemicals, and may not even contain the substance sought.

SUPPLEMENTARY ACTIVITY:

ACTIVITY 3. Film or Filmstrip

Show a film or filmstrip to present more detailed information about a drug of local concern. Have students prepare short reports summarizing the major points and what they learned that they found interesting.

Student References (cont'd):

"Some Substances Used for Nonprescribed Drugging Effects" (Pharmaceutical Manufacturers Association)

Medicines and Drugs by Brent Q. Hafen and Brenda Peterson

References for Low Reading Level Students:

Let's Talk About Drugs, Alcohol and Tobacco by Kenneth L. Packer and Jeannine Bower

"Scriptographic Fact Folders" (Channing L. Bete)

Examples of Films and Filmstrips:

"Angel Dust: The Nightmare Trip" (AVNA)

"Cocaine: The High Class High" (AVNA)

"Life Skills: Alcohol and Other Drugs" (Society for Visual Education)

"Marijuana Bulletin: A Research Update" (Sunburst Communications)

"PCP - You Never Know" (Churchill Films)

"Psychoactive" (Pyramid Films)

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| OBJECTIVE<br>The students will discuss the structure and function of the neuron and the brain, and how neuron transmission and brain function are affected by drug use.<br>TEACHER INFORMATION<br>The specialized cells of the nervous system are called neurons. Neurons are electrochemical units which depend on a constant flow of chemical-carrying electrical charges to function. Neurohormonal transmitters are chemicals emitted by neurons which cause the electrical charges to be transmitted across the synapse (space) between nerve cells. Examples of neurohormonal transmitters include acetylcholine, norepinephrine and serotonin. Chemical similarities between drugs and neurohormonal transmitters enable drugs to interfere with normal electrochemical reactions, affecting the body. For example, nicotine is chemically similar to acetylcholine, which produces excitability. However, nicotine not only elicits excitability, but also blocks out meaningful impulses that would normally be directed by acetylcholine. | ACTIVITY 1. Drugs and The Neuron<br>Using visual material, present the structure and function of neurons and explain how they transmit nerve impulses. Describe to the students the functions of dendrites, cell body, axon, synapse space and neurohormonal transmitters. Explain to the students that synaptic events are sensitive to drugs since chemicals can interfere with the chemistry of the neuron, in the following ways:<br>- by inhibiting the production of a neurohormone;<br>- by causing the neurohormone to be broken down more rapidly than normal;<br>- by altering the postsynaptic membrane so that neurohormones would not affect it;<br>- by mimicking the action of a neurohormone;<br>- by causing excessive production and release of a neurohormonal transmitter.<br>Ask students to consider what would happen in each instance. | Teacher References:<br>Drug Education: Content and Methods by Daniel A. Girdano and Dorothy Dusek, Chapter 2.<br>Drugs, Society and Human Behavior by Oakley Ray | Biology<br>Chemistry |

GRADES 10, 11, 12 CONCEPT I

CONCEPT: Drugs affect the homeostasis of the body.

**OBJ. & TEACHER INFO.**

TEACHER INFORMATION

The student reference suggested here is somewhat sophisticated for high school students. It is included as the source for this particular activity. Current biology or health textbooks may also be used, however.

**LEARNING ACTIVITIES**

ACTIVITY 2. Drugs and the Brain (Research & Report)

a. Divide the class into groups, and to each group assign one of the following areas of the brain:

- brainstem
- thalamus
- hypothalamus
- cerebellum
- cerebrum
- limbic system

Have each group research the structure and the function of the specific brain area assigned. When the research is completed, restructure the groups so that every group now has a member who represents each part of the brain. Have each group member explain the structure and function of his/her part, and its relationship to the other parts of the brain.

b. Assign each "brain" group one of the following drug categories:

- barbiturates
- tranquilizers
- amphetamines
- alcohol
- marijuana
- caffeine

Have each group work together, as a "brain," to solve the problem: How would each part of the brain react to this drug? When necessary research is completed and ideas have been compiled, have each group select one student to give an oral report to the class on what the group has learned.

**RESOURCES**

Teacher Reference:

Drug Education: Content and Methods
by Daniel A. Girdano
and Dorothy Dusek

Student Reference:

Drugs: A Factual Account
by Dorothy Dusek and
Daniel A. Girdano

**SUBJECTS FOR COORDINATION**

Biology

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFORMATION<br>Prepare the resource person by providing information on what the students have been learning, and what questions they would like answered.<br>This activity may be used as an alternative to Activities 1 and 2 where the level of difficulty of these activities is considered too high for the class. | ACTIVITY 3. Guest Speaker<br>Invite a resource person to discuss the effects of drugs on the nervous system. Have students prepare questions for the speaker in advance. | Examples of Resource Persons:<br>Pharmacologist<br>Biology teacher<br>Research scientist | Biology |
| | ENRICHMENT ACTIVITY FOR THE GIFTED: | | |
| TEACHER INFORMATION<br>Since neurohormonal transmitters have only recently been discovered, knowledge of their function is still limited. Descriptions of neurotransmitters and how they work is not, therefore, included in many educational texts or popular references. The teacher and the students should find it rewarding to locate recent reports of new discoveries and theories in periodicals such as Psychology Today and Science News; The Reader's Guide to Periodical Literature will be helpful in locating this information.<br>Endorphins and enkephalins are polypeptides (groups of amino acids) which may function as neurotransmitters in the brain. | ACTIVITY 4. Neurohormonal Transmitters<br>Have the students research the effects of the following drugs on neurohormonal transmitters, and explain how these effects are experienced by the body.<br>- amphetamines on dopamine and norepinephrine<br>- nicotine on acetylcholine<br>- barbiturates on serotonin<br>- opiates on endorphins and enkephalins | Student References:<br>Drugs: A Factual Account by Dorothy Dusek and Daniel A. Girdano<br>Research reports published in science journals; articles in news magazines. | Biology<br>Chemistry |

CONCEPT: Drugs affect the homeostasis of the body.

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

## OBJECTIVE

The students will explain how various events can affect the balance of the body.

## TEACHER INFORMATION

Body functions change to accommodate physiological and psychological pressure, activity and stress, producing tension. Pressure, activity and stress can be increased or decreased by events in people's daily lives and the ways people choose to react to these events and conduct their lives.

A tension level reflects the degree of pressure, activity or stress within the body. During the day tension levels generally rise and fall within a normal range. Tension levels are affected by physical activity. For example, running and playing hard require a high degree of body tension. As the activity is continued, body tension increases. When the activity is discontinued and the body rests, tension is reduced. Ways of feeling, thinking and responding can also change tension levels.

(Cont'd on next page.)

## ACTIVITY 1. Highs and Lows in Me

a. Distribute the example of the Balance Graph to the students, and explain that a balance graph can be used to illustrate the tension levels that are experienced due to certain activities and conditions. Allow time for the students to interpret the graph and ask questions.

b. Distribute the worksheet, Plot a Balance Graph. Have the students plot a balance graph which represents a period of time in a day. Ask the students to share the graphs.

c. Have a class discussion regarding what can be learned from balance graphs.

Questions to Consider:

- What can a balance graph tell you about yourself?
- Could you tell from a balance graph if someone has difficult coping? What might this person's graph look like?
- Could a balance graph suggest that someone is sick? What might this person's graph look like?
- What would a balance graph that was perfectly straight over a period of time tell you about the person?
- Can you control your balance graph? How?

Materials:

Example: Balance Graph, A Segment of a Day, p. 13

Materials:

Worksheet: Plot a Balance Graph, p. 15

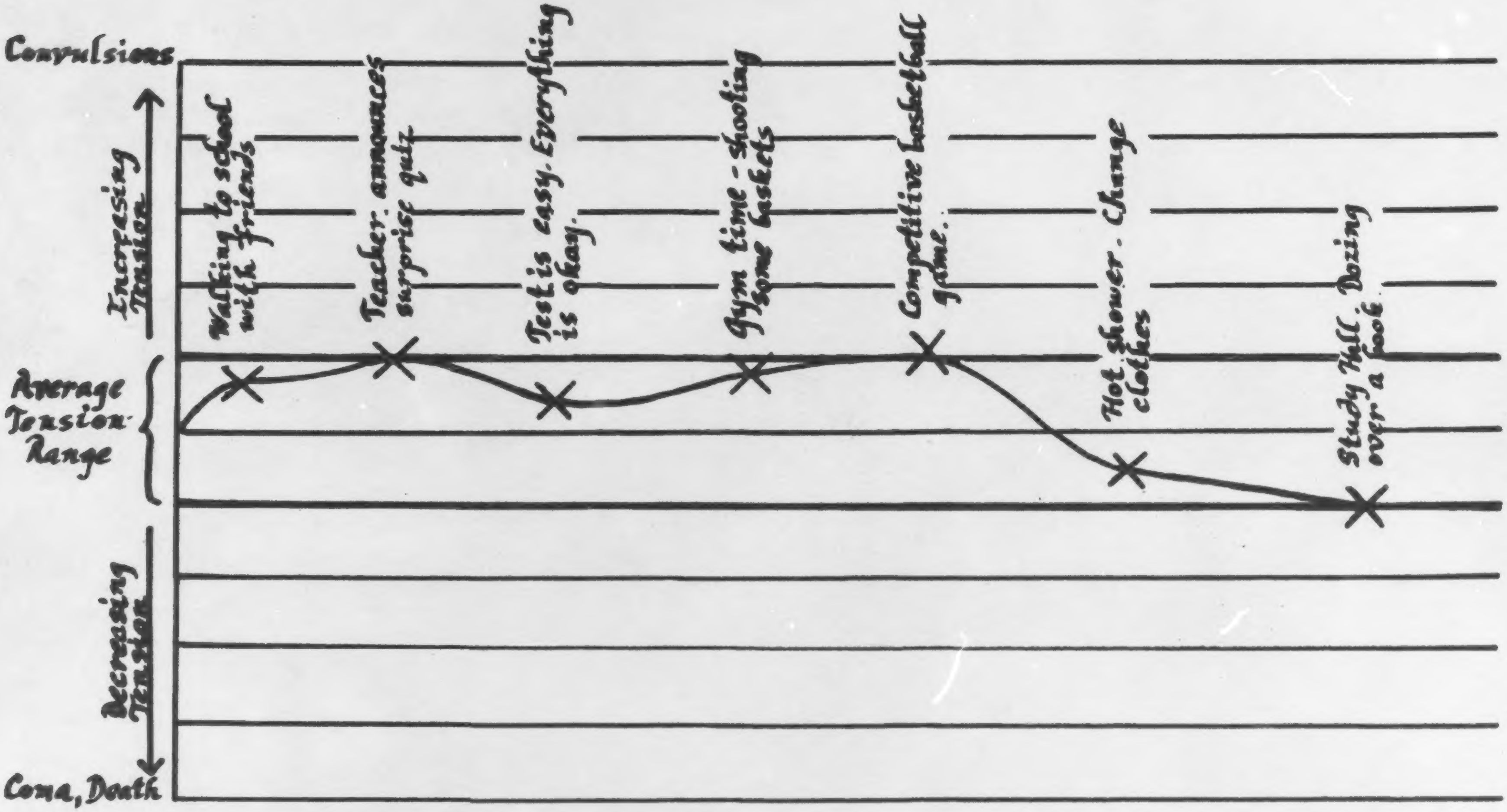
GRADES 10, 11, 12 CONCEPT I

CONCEPT: Drugs affect the homeostasis of the body.

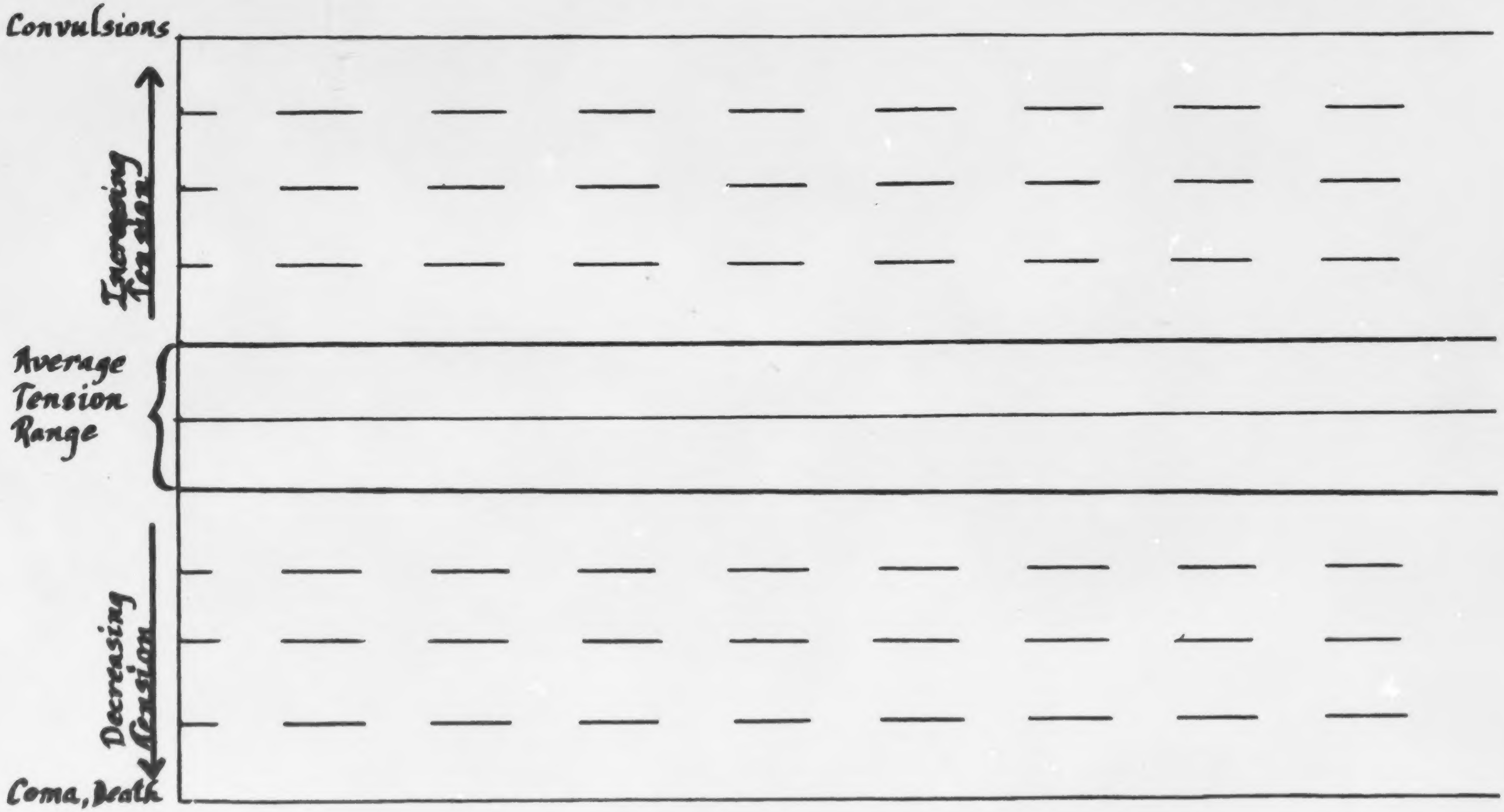
| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFO. (cont'd)<br>Meditation and self hypnosis can reduce tension levels. Feelings of anger, fear, anxiety and excitement raise body tension.<br>Everyone has a normal or average tension range within which s/he functions. The Balance Graph is used to illustrate this concept. | | | |

# Example: Balance Graph

## A Segment Of A Day



# Worksheet: Plot A Balance Graph



GRADES 10, 11, 12 CONCEPT I

CONCEPT: Drugs affect the homeostasis of the body.

## OBJ. & TEACHER INFO.

### OBJECTIVE

The students will explain how various substances, when taken into the body, affect the balance of the body.

### TEACHER INFORMATION

When alcohol is ingested, the central nervous system is depressed. Feelings of anxiety and inhibition are reduced. As the blood alcohol level drops, the depressant effect wears off. A rebound occurs. The body moves to return to average tension level, but passes through this level into a level of agitation. During the period of agitation, the individual feels higher tension levels, and experiences a hangover.

(Cont'd on next page.)

## LEARNING ACTIVITIES

### ACTIVITY 1. Graphing Tension Changes

a. Present to the students the balance graph worksheets, Tension Changes (Depressant) and Tension Changes (Stimulant). Explain the graphs to the students.

b. Write the names of various drugs on cards and place in a container. Have each student draw a card.

Examples of Drug Names to Use:

heroin
Quaalude
caffeine
Librium
Benzedrine
cocaine
Methadone
nicotine

Have the students graph the tension changes for their particular drug card on the worksheet, Plot the Drug Reaction. Have the students explain the graphs.

c. Discuss with students what information would be required to produce an accurate balance graph that shows the effects of a one-time use of a drug by an individual. What would the graph show about the person's reaction? What reactions might not show on the graph?

## RESOURCES

Materials:

Worksheets: Tension Changes (Depressant), p. 19
Tension Changes (Stimulant), p. 21

Student References:

"Quaaludes & Sopors" (Do It Now Foundation)
Also, see Materials List.

Materials:

3 x 5 cards
Marker
Container for "drawing"
Worksheet: Plot A Balance Graph, p. 15 (one for each student)

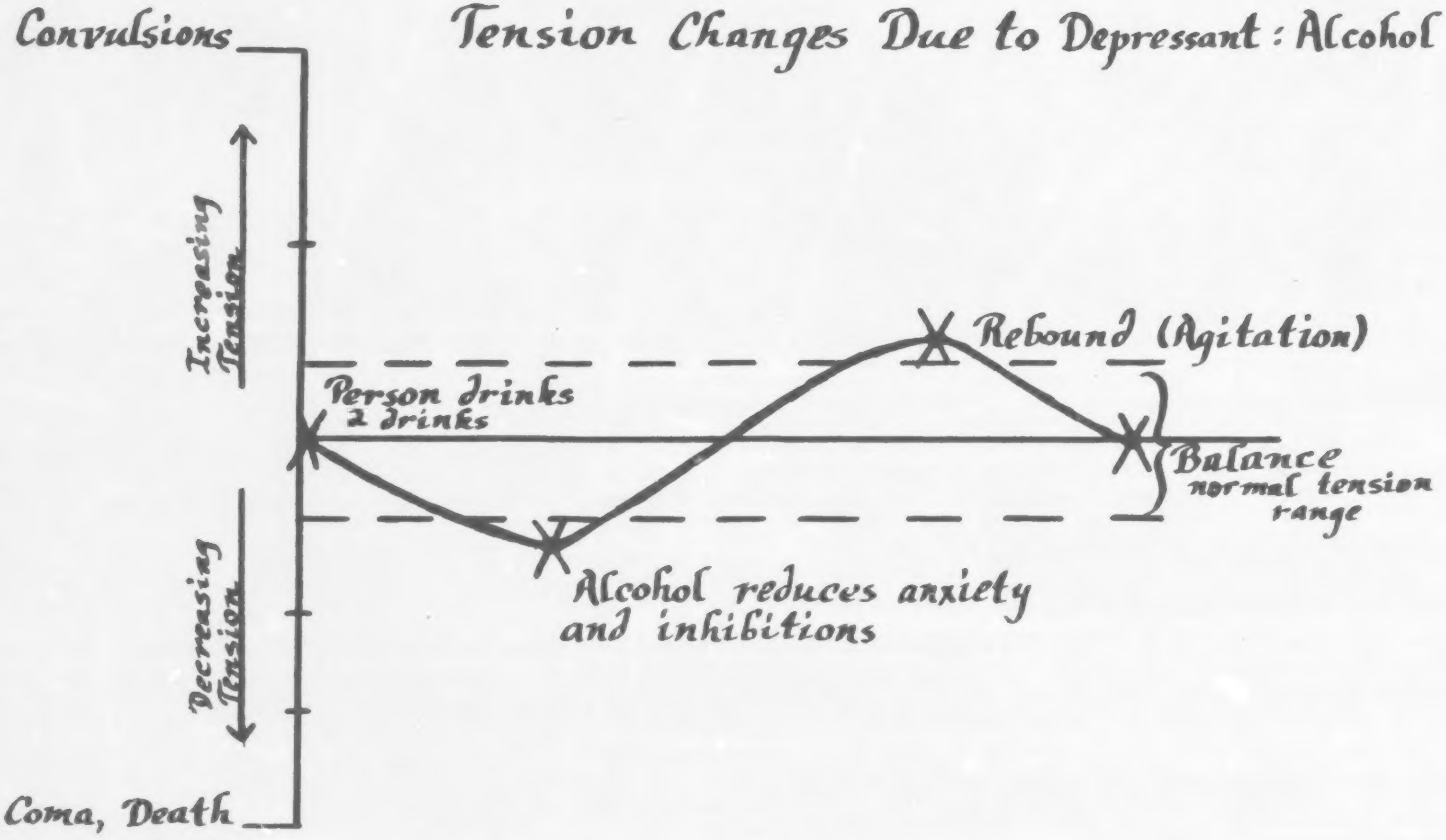
## SUBJECTS FOR COORDINATION

Biology

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFO. (cont'd)<br>A similar phenomenon occurs with a stimulant, but the tensions occur in the reverse direction. Initially, after an upper, increased tension levels occur, giving the individual a feeling of energy and well-being.<br>Then rebound occurs and energy seems to dissipate. The body moves to return to the average tension level, but passes through this level into a state of depression and decreased energy level. After a period, the body returns to the normal tension level. It is the rebound effect that causes an individual to repeat the use of a substance.<br>It is important to point out that whenever a drug is taken once, the homeostasis of the body is changed. | | | |

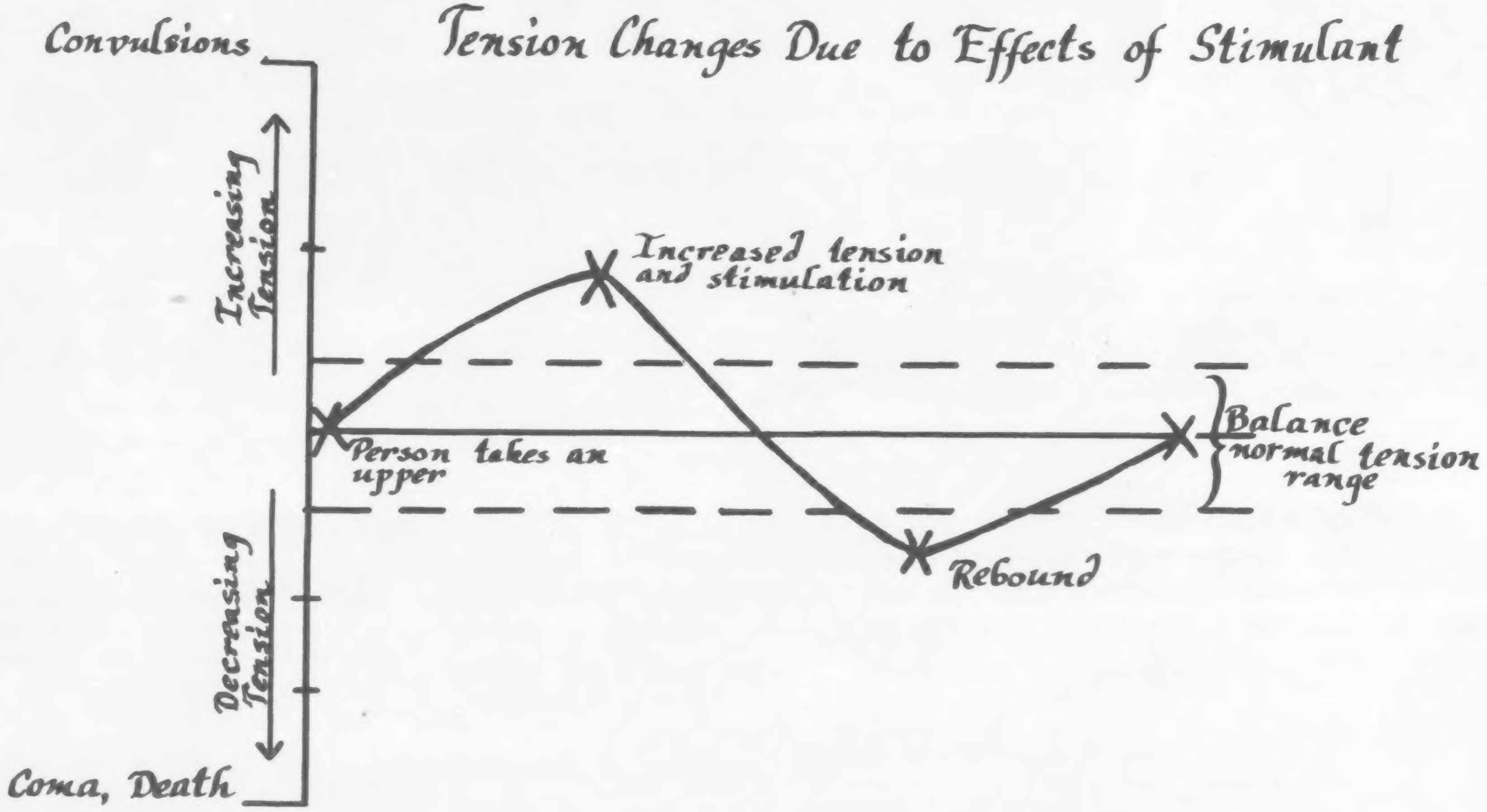
# Worksheet: Tension Changes (Depressant)



Tension Changes Due to Depressant: Alcohol

Convulsions
Increasing Tension
Person drinks 2 drinks
Rebound (Agitation)
Balance
normal tension range
Alcohol reduces anxiety and inhibitions
Decreasing Tension
Coma, Death

# Worksheet: Tension Changes (Stimulant)



Tension Changes Due to Effects of Stimulant

Convulsions
Increasing Tension
Decreasing Tension
Coma, Death
Increased tension and stimulation
Person takes an upper
Balance normal tension range
Rebound

GRADES 10, 11, 12 CONCEPT I

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| OBJECTIVE<br>The students will discuss drug interactions and the effects of mixing drugs on the body. | ACTIVITY 1. Interactions<br>Explain to the students that drugs are taken frequently in combination to produce a desired effect. Ask them to recall times when they have taken aspirin and antibiotics to combat sickness. Have them share other drug combinations that have been taken during illness and their effects.<br>Distribute the Drug Interaction Information Sheet. Have the students read the sheets and discuss the drug interaction effects. Encourage the students to present their own experiences with drug interaction effects. Ask the students to share "I learned..." statements. | References:<br>"Drug Effects Can Go Up In Smoke";<br>"Food and Drug Interactions" (Food & Drug Administration)<br>"Alcohol/Drug Combinations" (Do It Now foundation)<br>Materials:<br>Drug Interaction Information Sheet, p. 25. | Biology<br>Chemistry |
| | ACTIVITY 2. Graphing Interactions<br>Distribute the worksheet, Plot the Drug Reaction. Have the students illustrate on the balance graph the following drug interactions:<br>alcohol and an amphetamine<br>alcohol and a barbiturate<br>Have the students share and explain their graphs. Elicit from the students other drug interaction effects. Have the students illustrate these interactions on the graph and discuss their representations. | Materials:<br>Worksheet: Plot the Drug Reaction, p. 27<br>Student Reference:<br>Drug Interaction Information Sheet, p. 25 | |

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFORMATION<br>This activity may be enhanced by having students participate in a follow-up community awareness activity or public education campaign. | ACTIVITY 3. The Local Scene<br>Contact a local hospital emergency room for statistical information on cases treated for drug overdose: 1) during the past year; 2) during the past month. In how many of these instances were drug interactions a factor? What drugs were involved? Have students discuss what the information shows about what people in their community need most to know about drug overdoses. | Resource:<br>Local hospital | |
| | SUPPLEMENTARY ACTIVITY: | | |
| TEACHER INFORMATION<br>The Dairy, Food and Nutrition Council, Inc. (678 Troy-Schenectady Road, Latham, NY 12110) has developed a program for integrating drug education with home economics: Nutrition and Drugs, Alcohol and Tobacco. Food and drug interactions are stressed. Teachers are trained, and materials obtained, through a visit to the local participating Dairy Council. (The program is not available in all areas of the State.) | ACTIVITY 4. Food and Drug Interactions<br>Have students investigate and report on the interactions between drugs and foods. | Reference:<br>"Diet-Drug Interactions" (National or local Dairy Council) | Home Economics<br>Nutrition |

# Drug Interaction Information Sheet

Drug interaction occurs when one or more drugs present in the body alter the action or effects of another drug present in the body at the same time. When drugs are taken in combination, the effects usually fall into one of four categories:

1. **Drugs taken together may act independently of each other.**

For example, aspirin lowers body temperature when a person has a fever, while an antibiotic drug is eliminating the organism responsible for the sickness. Each drug acts independently, although they are both present in the body.

2. **Drugs taken together have a summative or additive effect.**

For example, aspirin and codeine relieve pain. When aspirin and codeine are taken together the combined effect is equal to the sum of the two drugs acting alone.

3. **Drugs taken together may have a synergistic effect.**

For example, when alcohol and antihistamines are taken together, the drugs interact to produce an exaggerated sedative effect. The synergistic effect is greater than the sum of the effects of the two drugs acting alone. This may also be referred to as drug potentiation.

4. **Drugs taken together may have an antagonistic effect.**

Any time the joint effect of two drugs is less than the sum of the effects of the drugs acting separately, the drug effect is antagonistic. For example, when alcohol and amphetamine are taken together, the alcohol has a depressant effect, and the amphetamine has a stimulant effect. Amphetamines decrease the depressant effects of alcohol. However, the impairment of motor coordination that results from alcohol is NOT counteracted by the amphetamine. As a result, the person who has been drinking feels more alert after taking an amphetamine, but driving and other motor skills are NOT improved, although the person tends to think they are. This false sense of skill can lead to an accident.

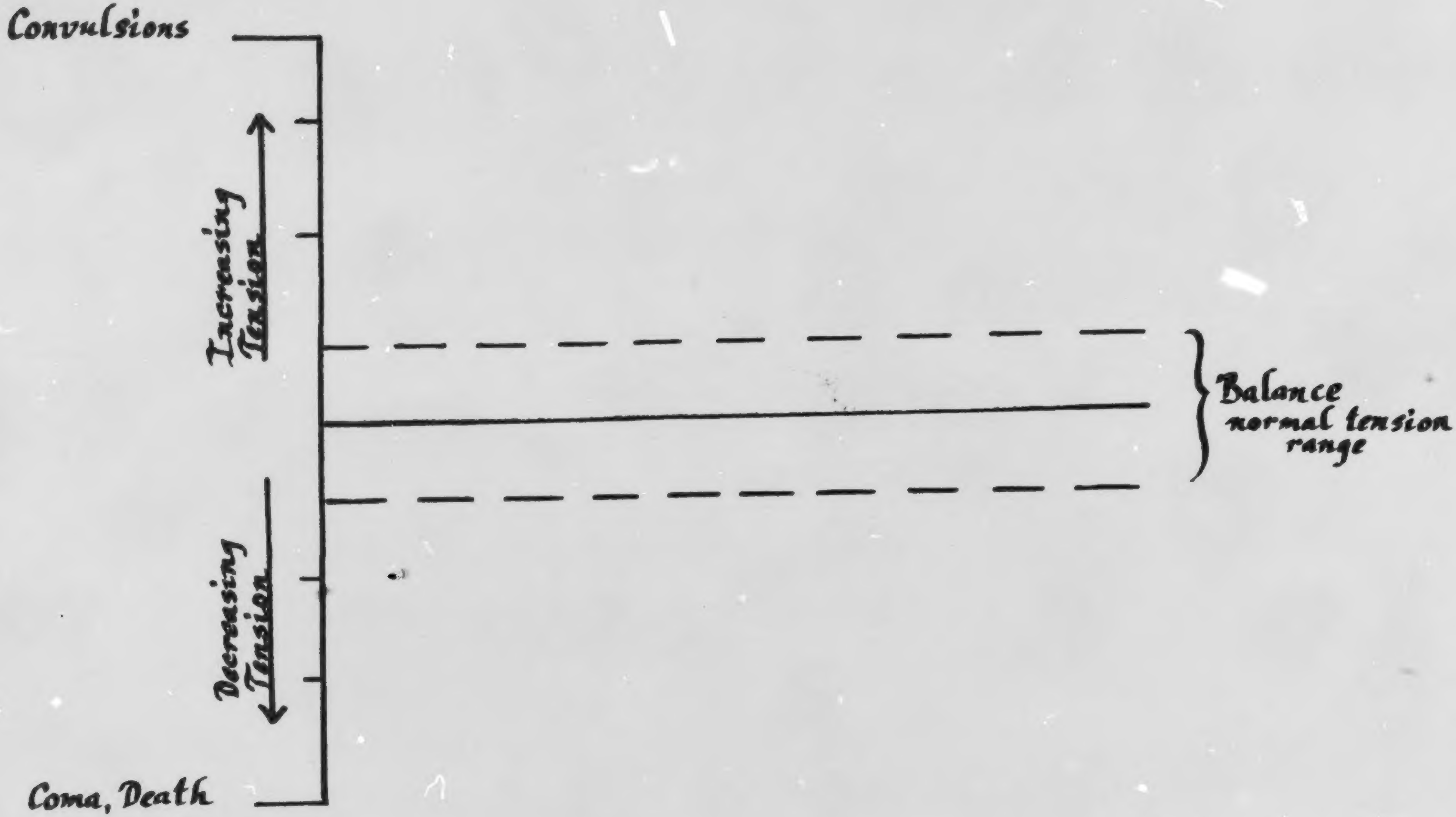
Dose and time are important in drug interactions. Generally, the larger the dose, the greater the effect. The greatest interaction effect occurs when two drugs are taken at the same time. It is generally true that the longer the interval between taking drugs, the less likely the interaction response will be observed.

Body weight and size also contribute to drug interaction. Smaller persons require smaller amounts of drugs to produce effects of equal intensity.

Toxic Interactions: These drug interactions have toxic effects, and can have serious consequences:

alcohol and barbiturates
alcohol and tranquilizers
alcohol and stimulants

# Worksheet: Plot The Drug Reaction


Convulsions
Increasing Tension
Balance
normal tension range
Decreasing Tension
Coma, Death

GRADES 10, 11, 12 CONCEPT I

CONCEPT: Drugs affect the homeostasis of the body.

### OBJ. & TEACHER INFO.

**OBJECTIVE**

The students will discuss dependence, tolerance, and withdrawal in relation to the use of certain drugs.

**TEACHER INFORMATION**

Dependence and tolerance are introduced in the Grade Five Curriculum.

Physical dependence occurs when a person uses a drug to such an extent that the body can no longer function normally without the drug. Physical dependence occurs at the cellular level.

Psychological dependence occurs when a person uses a drug to such an extent that s/he feels use must be continued in order to function normally.

Tolerance occurs when the body requires larger doses of a drug to achieve the initial effect or when more of the drug is needed to achieve an effect.

Withdrawal occurs when a person who has become dependent on a drug stops taking the drug. Withdrawal can be very distressful, and even fatal.

### LEARNING ACTIVITIES

ACTIVITY 1. Dependence and Tolerance

Have students identify three of their own habits. Ask the students to describe how they would feel when each of the habits is removed from them.

Review the meanings of physical dependence, psychological dependence and tolerance.

Have the students discuss dependence and tolerance in relation to barbiturate use, tranquilizer use, alcohol use and amphetamine use. Choose specific drugs to discuss with the students.

Explain what happens in the body to produce the distressful symptoms known as "withdrawal," relating this to the concept of homeostasis.

Questions for Investigation:

- Do some drugs produce dependence and tolerance more easily than others?
- What are some commonly-used prescription drugs that can produce dependence-tolerance problems?
- What withdrawal symptoms are associated with these drugs?

### RESOURCES

References:

The Essential Guide to Prescription Drugs by James W. Long, M.D.

Medicines and Drugs: Problems and Risks, Use and Abuse by Brent Q. Hafen and Brenda Peterson, Chapter 10.

Physicians' Desk Reference

Your Medicine Chest by Wayne O. Evans and Jonathan O. Cole, M.D.

### SUBJECTS FOR COORDINATION

Biology
Chemistry

GRADES 10, 11, 12 CONCEPT 1

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | ACTIVITY 2. Balance Graphs<br>Have the students illustrate on the worksheet, Plot the Drug Reaction, the dependence-tolerance sequence for the following substances:<br>cocaine<br>Valium | Materials:<br>Worksheet: Plot the Drug Reaction, p. 27 | |
| | ACTIVITY 3. Recognizing Dependence and Tolerance<br>Present the students with the worksheet, Recognizing Dependence and Tolerance. Have the students decide which of the situations given represent:<br>- physical dependence (code = body)<br>- psychological dependence (code = mind)<br>- tolerance (code = tolerance)<br>- all of the above (code = all)<br>- none of the above (code = none)<br>Allow the students to explain and discuss their choices. | Materials:<br>Worksheet: Recognizing Dependence and Tolerance, p. 31 | |

# Recognizing Dependence & Tolerance

Read the following situations and decide if the situation represents:

- physical dependence (code = body)
- psychological dependence (code = mind)
- tolerance (code = tolerance)
- all of the above (code = all)
- none of the above (code = none)

______________ Hugh smokes a joint before school and during lunch to "get him through the day."

______________ Jeffrey takes a Quaalude before going to the disco on Saturday night.

______________ The Bordens can't get going in the morning unless they have two cups of coffee.

______________ Sal always stops at a local bar after work at night. He has two martinis and talks with his friends before driving home to face his family.

______________ Mother takes a tranquilizer every time she has an argument with her daughter.

______________ Jamie snorts before going to a party in order to feel "up."

______________ When Isabel has a deadline to make, she smokes two packs of cigarettes a day.

______________ Pedro drinks a six pack of beer while watching the ball game at night.

______________ Mother watches the soap operas every afternoon.

______________ Josh needs a candy bar after lunch.

______________ Sue, an expectant mother, celebrates her pregnancy with a bottle of champagne.

______________ Kelly smokes a joint before riding his bike to school.

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| OBJECTIVE<br>The students will discuss the influence of drugs on driving safety. | ACTIVITY 1. Drugs and Driving<br>Have the students label the following statements as true or false:<br>a. Different people's driving skill is affected differently by the same drug. (True)<br>b. Marijuana does not affect driving skills and judgment. (False)<br>c. Tranquilizers slow you down, and help you think more clearly while driving. (False)<br>d. Amphetamines improve driving skill for a limited period of time. (True)<br>e. Amphetamines keep you awake but make you edgy and less coordinated. (True)<br>f. Drivers under the influence of marijuana have narrower vision fields. (True)<br>g. Antihistamines can be dangerous to take if you are going to drive. (True)<br>h. Caffeine can help the drunk driver sober up. (False)<br>Have the students refer to pamphlets to find the answers to previous questions. Discuss the belief, "Driving is safest without drugs." Invite the students to offer their opinions on drugs and driving. | References:<br>"Drugs and Driving" (National Clearinghouse for Drug Abuse Info.)<br>"Substance Use and Safety" (Do It Now Foundation)<br>"Drugs and Driving" (Food and Drug Admin.)<br>"Marijuana, Other Drugs and Their Relation to Highway Safety" (National Highway Traffic Safety Admin.) | Driver Education |

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **TEACHER INFORMATION**<br>Students can refer back to previously completed worksheets in conducting this activity. | ACTIVITY 2. Balance Graph, Drugs and Driving<br>Discuss with the students their ideas about drugs and driving. Write these ideas on the chalkboard.<br>Choose a drug to focus on. Using the worksheet, Plot the Drug Reaction, plot the reaction of the drug. From this graphic presentation, have the students explain how the drug affects tension levels in the body. Have the students discuss how these changes in homeostasis can affect driving judgment and skill.<br>Have the students contribute an "I learned..." statement. | Materials:<br>Worksheet: Plot the Drug Reaction, p. 27 | Driver Education |
| | ACTIVITY 3. Preventing DWI Accidents<br>a. Present to students or have students research statistics relating to traffic accidents caused by or associated with DWI (driving while intoxicated), and DWAI (driving while ability impaired).<br>b. Have students write to the Department of Motor Vehicles for information regarding what state government is doing to alleviate this problem and interview local authorities for information on what is being done by the community.<br>c. Have students brainstorm things individuals can do to reduce problems caused by mixing drugs and driving.<br>d. Have students role-play situations where the decisions they make can help prevent drug driving accidents. | Address:<br>Department of Motor Vehicles<br>Empire State Plaza<br>Swan St. Bldg.<br>Albany, NY 12228 | |

GRADES 10, 11, 12 CONCEPT I

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **OBJECTIVE**<br>The students will discuss the effects of drug use on a pregnant woman and on the fetus. | ACTIVITY 1. Fetal Development and Drugs<br>Select a. or b.<br>a. Explain how most drugs taken by a woman during pregnancy reach the fetus. Give an example of how different body parts of the fetus are more vulnerable during different stages of fetal development. | References:<br>"D*A*T*A*;"<br>"Drugs In Pregnancy: Effects on the Fetus and Newborn" (March of Dimes)<br>"Drugs and Pregnancy" (Food and Drug Administration) | Biology<br>Chemistry<br>Home Economics |
| **TEACHER INFORMATION**<br>In discussing the effects of drugs on the fetus, do not neglect to include tobacco. (See Tobacco Education Curriculum) and alcohol.<br>Stress the special vulnerability of the fetus during the first trimester of pregnancy. | b. Film<br>View the film "Born Hooked." Report on why it is essential for the addicted female to seek early and continuous prenatal care. Explain the symptoms of drug withdrawal in the newborn from heroin and methadone. Review resources available for pregnant addicts in your community. | Film:<br>"Born Hooked" (March of Dimes) | Biology<br>Chemistry<br>Home Economics |
|  | ACTIVITY 2. Posters<br>Have the students develop posters for getting the message to other students about the effects of drugs on unborn babies. | Materials:<br>For poster-making | Art |
| **TEACHER INFORMATION**<br>Develop the idea that few, if any, drugs are solely beneficial or harmful by their nature. In prescribing drugs for pregnant women, doctors must weigh both the benefits and risks to health. | ACTIVITY 3. Beneficial or Harmful?<br>List on the chalkboard the names of various over-the-counter, prescription and illegal drugs which affect the pregnant woman and the fetus. Have each student select one drug from the list, and research the known effects on the fetus. Which drugs are beneficial? Which drugs are harmful? Develop a case study for a drug for which there is inconclusive evidence. | References:<br>Just So It's Healthy by Lucy Barry Robe<br>A Woman's Choice (National Clearinghouse for Drug Abuse Information) | Biology<br>Chemistry<br>Home Economics |

CONCEPT: Drugs affect the homeostasis of the body.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | SUPPLEMENTARY ACTIVITY | | |
| | ACTIVITY 4. Interview<br>Invite an obstetrician, pediatrician, nurse-midwife or other qualified resource person to speak about the effects of drugs on the fetus. | Resource Person:<br>Obstetrician, pediatrician or nurse-midwife | Biology<br>Chemistry<br>Home Economics |

CULMINATING CONCEPT EVALUATION ACTIVITY:

Open-Ended Evaluation

List on the chalkboard the topics covered in the concept. Have the students respond to the following sentence stems:

- An important piece of information I learned was________________________________________.
- An activity I found interesting was______________.
- I felt good when_____________________________.
- I would like to learn more about________________.
- In this unit, I would change____________________.

Record the ideas presented by the students for use in future planning.

CONCEPT: Drugs are a major force in our society.

**OBJ. & TEACHER INFO.**

**OBJECTIVE**

Students will trace the history of selected drugs to gain a perspective on use, misuse, and abuse.

**TEACHER INFORMATION**

These activities can be done individually or in small groups.

**LEARNING ACTIVITIES**

ACTIVITY 1. Research and Report

Select a. or b.

a. Histories of Drug Uses

Have students select a drug and research the history of its uses by man. Students should then prepare reports, which may be combined into a booklet. Each report should be two or three handwritten pages and include discussion of any medicinal, ceremonial, recreational or other use found for the drug, changing attitudes toward the drug, and how these uses and attitudes may have affected history.

When students have concluded their reports, have them discuss the questions: "Has man learned, over time, to use drugs more wisely?" and "What factors determine how a drug will be used?"

b. Drugs and Culture

Have students select a culture, group or country in which drug use has played an important role, either throughout history or at some particular period in history.

Examples:

- India (marijuana)
- China (marijuana, opium)
- South America (cocaine)
- American Indians (peyote, tobacco, alcohol)
- Armed Forces (morphine, heroin, amphetamines, alcohol)
- Athletes (amphetamines, nitroglycerine, steroids, etc.)
- Entertainers (alcohol, marijuana, heroin, etc.)

(Cont'd on next page.)

**RESOURCES**

Examples of References:

Hallucinogens and Culture by Peter T. Furst
Hallucinogenic Plants by Richard Evans Schultes
Marijuana. The First Twelve Thousand Years by Ernest L. Abel

**SUBJECTS FOR COORDINATION**

History

CONCEPT: Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|

ACTIVITY 1.b. (cont'd)

Have students prepare reports, limited to two handwritten pages, on the role played by drug use in the society or group selected.

When students have concluded their reports, have them discuss the question: "What factors in a group determine how the use of drugs will affect the group?"

ACTIVITY 2. Interviews

Have students interview grandparents, or older individuals about drugs used in earlier times. Have them consider how the uses of the drugs mentioned have changed.

ACTIVITY 3. Advertisements

Collect and classify ads from old magazines for drug substances. Have the students determine if the substances advertised have changed and/or if society's attitudes toward the substances have changed and how.

Materials:

Old magazines

SUPPLEMENTARY ACTIVITY:

**TEACHER INFORMATION**

The association of fame with drugs may have some counterproductive effects if students acquire the misconception that the drugs enabled the persons to become famous.

ACTIVITY 4. Drug Use By Famous People

Have students research the use of drugs by famous persons.

Examples:

Sigmund Freud
Malcolm X
Edgar Allan Poe
Charles Dickens
Hector Berlioz
Piri Thomas

Have students prepare oral reports for class presentation regarding what these persons believed about the drugs they used, and how substance use affected their lives.

Resource:

Library

Social Studies
English

GRADES 10, 11, 12 CONCEPT II

CONCEPT: Drugs are a major force in our society.

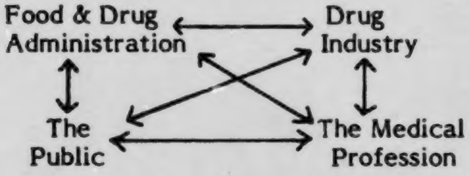
OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

**OBJECTIVE**

The students will examine and discuss the interrelationships among the drug industry, controls and society.

ACTIVITY 1. Interrelationship Charts

Present the students with the following chart:



Divide students into groups to examine and research the interrelationships represented in the chart as they pertain to the control of the drug market. Have students select one of the four groups represented on the chart and discuss how they relate to each of the other three groups.

After each group has completed its research, the class can share information to explain the interrelationships depicted by the chart.

**References:**

Drugs of Abuse
(Drug Enforcement Admin.)

Questions and Answers About the U.S. Prescription Drug Industry
(Pharmaceutical Manufacturers Association)

"We Want You to Know About Today's FDA"
(Food and Drug Administration)

Social Studies

ACTIVITY 2. Investigation and Discussion

The interrelationships between the drug industry, controls, and society sometimes lead to controversy. Have students investigate some of these controversial issues and present their findings in panel discussions, debates, and/or sociodramas. Some of the issues they might examine include:

(a) use of DES
(b) medical uses of marijuana
(c) use of laetrile in cancer treatment

**Reference:**

A Search for Answers
(Pharmaceutical Manufacturers Association)

**Resource Agencies:**

American or local Cancer Society
Food and Drug Administration
March of Dimes

Social Studies

CONCEPT: Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **TEACHER INFORMATION**<br>In some communities it it may be feasible to obtain an FDA Resident Post official or other representative to debate a pharmaceutical industry official before the class (or several classes). | ACTIVITY 3. Debate: Government Control vs Free Enterprise<br>Have students debate the topic "The FDA should be given more (or less) power over what drugs that can be sold in the market place." | References:<br>See previous page | Social Studies |
| **OBJECTIVE**<br>The students will discuss and analyze social policies regarding drug use.<br>**TEACHER INFORMATION**<br>Information regarding the Marijuana Law may be obtained from the Division of Substance Abuse Services, Stuyvesant Plaza, Executive Park, Albany, NY 12203, or from your local State Legislator. Information regarding other laws, and pending legislation, may be obtained from your local State Legislator or from local law enforcement agencies. | ACTIVITY 1. Current Laws and Policies (Panel)<br>a. Invite a police or narcotics officer, a lawyer, a school administrator and a school guidance counselor or probation officer to discuss and answer student questions about:<br>- current drug laws<br>- school drug policies<br>- their roles in handling drug use and abuse problems<br>- what a student can expect to happen in various situations<br>- what the best action would be for someone who has a friend s/he suspects is abusing drugs.<br>Have students take notes on the presentation. Students can then elect to a) prepare a report summarizing the major points or b) prepare a list of questions for further investigation, research answers and report to the class.<br>b. Have the class brainstorm drugs which were not covered by the panel presentation. Divide the class into small groups and have each group research laws pertaining to the use of these drugs. Have each group report its findings to the class. | Resource Persons:<br>Police or narcotics officer<br>Lawyer<br>School administrator<br>Guidance counselor or probation officer<br>References:<br>Drugs: A Factual Account by Dorothy Dusek and Daniel A. Girdano<br>Medicines and Drugs by Brent Q. Hafen and Brenda Peterson. | Social Studies |

## GRADES 10, 11, 12 CONCEPT II

CONCEPT: Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | ACTIVITY 2. Laws or No Laws?<br>Using a fish bowl technique, have students discuss: Should there be laws governing drug use? | | Social Studies |
| TEACHER INFORMATION<br>All students should understand the meaning of the term "decriminalization" and how this differs from "legalization." | ACTIVITY 3. Debating Issues<br>Divide the class into four groups. Assign each group one of the following topics for research and debate. The entire group should research and discuss the issues involved as a unit, then appoint two of its members to present opposing views in a debate before the class.<br>Issues to Be Debated:<br>a. Illegal Drug Paraphernalia: Free Sales vs Ban on Sales<br>b. Drug Law Violators Abroad: Should Be Prosecuted Under U.S. Law vs Should Be Prosecuted Under the Law of the Country Visited<br>c. Marijuana Laws: Decriminalization vs Legalization<br>d. Confidentiality: Drug Abusers Schould Be Protected vs Drug Abusers Should Be Reported to Authorities. | Reference:<br>"It Was Such A Little Amount" (Bureau of Public Affairs)<br>Teacher Reference:<br>Drugs, Society, and Human Behavior by Oakley Ray, pp. 412-417. | Social Studies |
| TEACHER INFORMATION<br>For a body vote, instruct the students to step to the right if they agree; step to the left if they disagree; and stay where they are if they have no opinion. | ACTIVITY 4. Opinions<br>Have the students "body vote" to determine class ideas about drug issues.<br>- People who are drug abusers should be given mandatory jail terms.<br>- Prescriptions should not be required for drugs.<br>- Marijuana use should be legalized. | | |

(Cont'd on next page.)

GRADES 10, 11, 12 CONCEPT II

**CONCEPT: Drugs are a major force in our society.**

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

ACTIVITY 4. (cont'd)

- Drug sellers should receive tougher jail terms than drug users who are not sellers.
- Juvenile drug pushers should be treated as adult criminal offenders.
- If someone wants to misuse/abuse drugs it's nobody's business but his/her own.
- Heroin should be legalized.

When the voting is over, open discussion with the students in terms of the consequences of the issues.

ENRICHMENT ACTIVITY FOR THE GIFTED:

ACTIVITY 5. Drug Control Laws

Have students research specific drug control laws and judicial decisions and prepare reports regarding society's changing attitudes toward drugs.

Examples of Topics:

- Federal Food, Drug and Cosmetic Act (Pure Food and Drug Act)
- Harrison Act
- Webb Decision (1920)
- Behrman Decision (1920)
- Lindner Case (1925)
- Robinson vs California
- Shafer Commission Report (National Commission on Marijuana and Drug Abuse)
- Boggs Act
- Narcotic Drug Control Act (1956)
- Narcotic Rehabilitation Act (1966)
- Comprehensive Drug Abuse Prevention Act
- Drug Abuse Office and Treatment Act

References:

Drugs: A Factual Account
by Dorothy Dusek and
Daniel A. Girdano

Drugs, Society and Human Behavior
by Oakley Ray

Resource:
Public library

GRADES 10, 11, 12 CONCEPT II

CONCEPT: Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **OBJECTIVE**<br>The students will discuss how a drug abuser contributes to the imbalance of society.<br>**TEACHER INFORMATION**<br>Refer to Appendix O, Glossary, for definitions of "drug abuse." | ACTIVITY 1. +, -, 0<br>Have students write the words "drug abuser" on a sheet of paper, then list word associations with the term which they classify as positive, negative or neutral. Discuss the meanings of the words and how they influence their perceptions of a "drug abuser." Define the terms "drug abuser" and "drug abuse." | | English<br>(Vocabulary) |
| **TEACHER INFORMATION**<br>The denotative meaning of a word is its designated, or dictionary, meaning.<br>Other meanings suggested by, or associated with, the word are referred to as connotative. | ACTIVITY 2. Denotation and Connotation<br>Explain to the students that words have different meanings to different people at different times. Write the word water on the chalkboard. Elicit from the students a denotative meaning. Ask the students to consider how the connotative meaning of the word water changes for a man lost in the desert and a family involved in a flood.<br>Write the words drug abuse on the chalkboard. first elicit from the students a denotative meaning, then elicit connotative meanings from the point of view of a pharmacist, a police officer, a parent or spouse, a counselor, a psychologist, a sociologist, etc. | | English |

**CONCEPT:** Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|

ACTIVITY 3. Drugs Cost More Than Money

Prepare a chart with the students which reflects the social, economic, political, psychological and physical costs of drug abuse. Display the chart in a prominent place.

Subjects for coordination: Social Studies, Economics

Examples:

Economic Costs
- Job absenteeism
- Loss of productivity
- Maintenance of treatment centers

Psychological Costs
- Emotional instability
- Vulnerability due to drug dependency
- Disintegration of self-image

Political Costs
- Treaties with other countries to curb production of drug substances
- Negotiations to retrieve citizens convicted of drug crimes in foreign countries
- Lobbies for/against drug laws and treatment centers

Social Costs
- Family disharmony
- Disruption of school routines
- Crime

Physical Costs
- Disruption of functioning of body systems
- Toxic fetal effects
- Negligence regarding health care

**TEACHER INFORMATION**

This activity can be enhanced if it is followed up through preparation and mailing of letters by students to their Legislators. The

(Cont'd on next page.)

ACTIVITY 4. Treatment/Rehabilitation Costs

Have students write or interview government officials regarding the costs of treatment and rehabilitation for:

a. one drug abuser per year (average)
b. one drug abuser from referral to completion of rehabilitation

(Cont'd on next page.)

Resources:
Names, addresses of local or state government officials

Subjects for coordination: Social Studies

CONCEPT: Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFO. (cont'd) | ACTIVITY 4. (cont'd) | | |
| letters should offer suggestions for saving tax dollars through improved methods for preventing drug abuse. | c. all treatment and rehabilitation for drug abusers in the State of New York for one year<br>Have students discuss ideas for how this money might be used to prevent people from becoming drug abusers. | | |
| | ACTIVITY 5. Filmstrip | Filmstrip: | |
| | Show and discuss a filmstrip that focuses on the characteristics of drug abusers. Consult accompanying teacher's guide for discussion questions. | "The Addictive Personality: Who Uses Drugs and Why" (Human Relations Media) | |

CONCEPT: Drugs are a major force in our society.

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

## OBJECTIVE

The students will compare and contrast viewpoints held by the drug industry, various organizations and health professionals.

## TEACHER INFORMATION

Examples of organizations with different views on marijuana use would be the National Organization for the Reform of Marijuana Laws, the American Council on Marijuana and Other Psychoactive Drugs, Citizens for Informed Choices on Marijuana, the American Cancer Society, the American Lung Association and the American Medical Association.

ACTIVITY 1. Select a. or b.

a. Research and Discussion

Have students bring in articles and publications which present various viewpoints regarding the use of a drug. Ask students to volunteer quotations from this material that present a viewpoint on the drug, and identify the source of the quotation. Record the sources of information on the chalkboard, and compare the views they expressed. Then ask students the following questions:

- What are the purposes of the organizations (sources)? How do their viewpoints reflect their purposes?
- Which sources are most reliable? (rank order if possible)
- Is it possible that some sources may be reliable in some ways, but not in others?
- Is it possible for more than one viewpoint to be accurate?

Subjects for coordination: Social Studies

b. Interviews

Have students interview doctors, hospital officials, pharmacists, regulatory agency officials, etc. regarding medical uses for drugs with a high potential for abuse and the medical availability of the drugs.

Examples:

| Drugs | Medical Uses |
|---|---|
| morphine | terminal cancer (severe pain) |
| codeine | pain |
| LSD | schizophrenia |
| marijuana | glaucoma, cancer (chemotherapy patients) |

(Cont'd on next page.)

Resource:

Local Cancer Society (information regarding use of marijuana in chemotherapy)

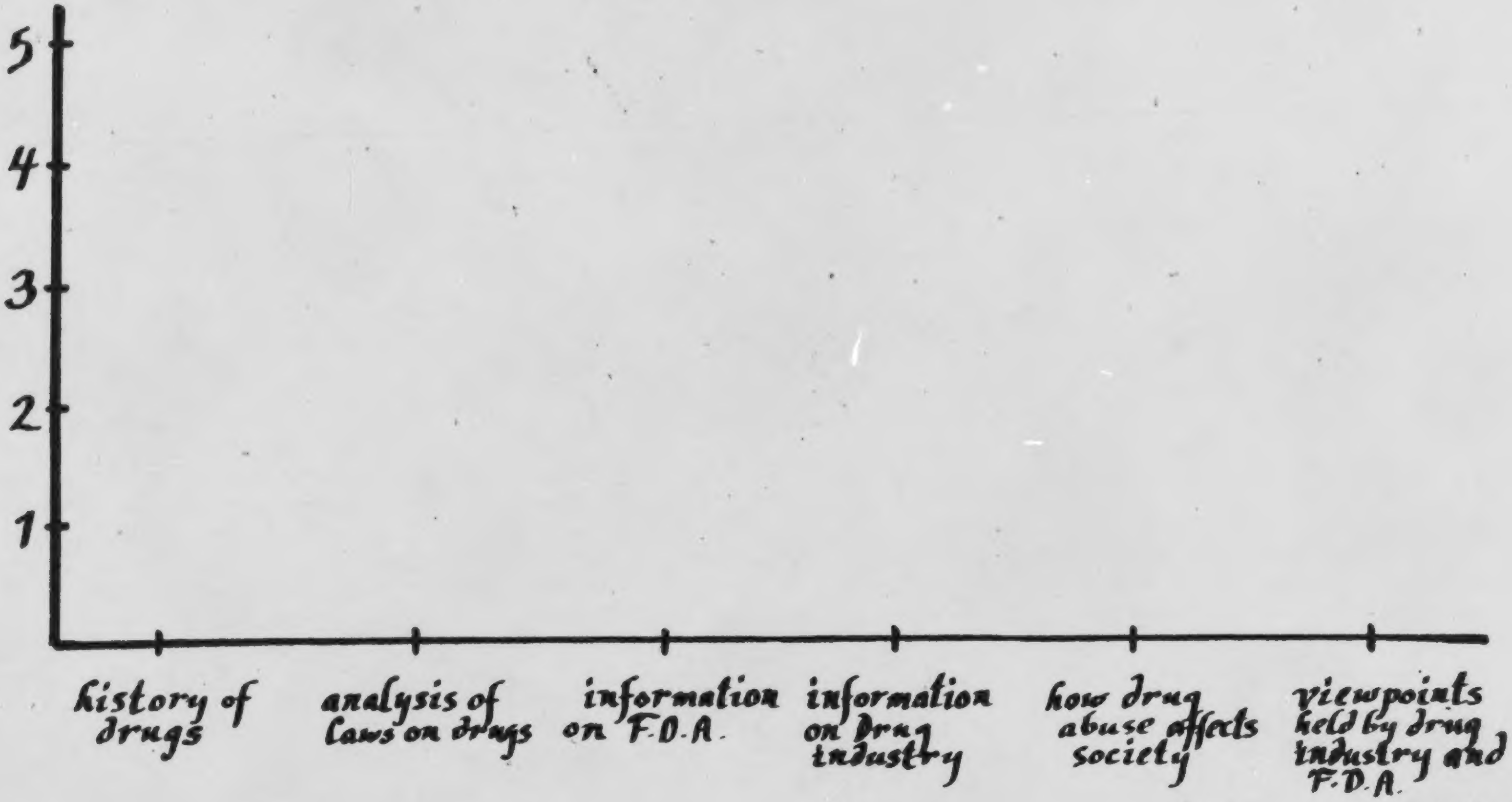
Social Studies

CONCEPT: Drugs are a major force in our society.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | ACTIVITY 1.b. (cont'd)<br>Interviews should focus on questions such as the following:<br>- Do you feel the drug has a medical use that justifies its manufacture by the pharmaceutical industry?<br>- Do you feel present regulations interfere with legitimate use of the drug in treatment?<br>- How do you feel the drug should be handled to best insure its proper use?<br>Have students present short oral reports to the class on their interviews. | | |
| | ACTIVITY 2. Drugs and Weight Control<br>Have students collect data and opinions regarding drugs used by people in weight control. Sources to be tapped could include ads in magazines, articles, TV commercials, local weight control programs or clinics, drug stores, physicians, books.<br>Have students display and discuss what they found in class. Followup with a class discussion regarding the reliability of various sources, pros and cons regarding the use of drugs in weight control and suggestions for alternatives to drugs for losing weight. | | Home Economics<br>Nutrition |
| | CULMINATING CONCEPT EVALUATION ACTIVITY:<br>Graphing Opinions<br>Distribute the evaluation sheet, Graphing Opinions, which focuses attention on topics covered in the development of this concept. Have the students fill in the the graph and share their opinions. Record their responses for use in shaping the curriculum to meet the students' needs. | Materials:<br>Evaluation: Graphing Opinions, p. 49 (one per student) | |

# Evaluation: Graphing Opinions

The graph below lists some of the topics and ideas which you learned concerning substance use. Rate each activity from "1" (learned a little) to "5" (learned a lot) depending on your experience with the activity. Indicate your rating with an "X". Draw a line connecting the X's.



GRADES 10, 11, 12 CONCEPT III

CONCEPT: Communication is influenced by our emotions and by skills in sending and receiving messages.

**OBJ. & TEACHER INFO.**

**OBJECTIVE**

The students will practice stating their feelings and needs in constructive ways.

**TEACHER INFORMATION**

"I-Messages" are introduced in the junior high curriculum.

An "I-Message" is a way of expressing feelings. There are three parts to an "I-Message." The first part states how the sender feels; the second part states the situation which causes the feeling; the third part states the consequences of the situation which causes the feeling. The "I-Message" follows a simple pattern: I feel...when...because... . The sender takes the responsibility for his/her own feeling. The person who receives the message does not feel blamed, and has an opportunity to change behavior.

**LEARNING ACTIVITIES**

ACTIVITY 1. Messages

Have the students describe what a feeling is. Ask them how they know when they are feeling emotions. Have the students brainstorm feelings they have had. Encourage the students to discuss how they express the feeling and the consequences of the expression.

ACTIVITY 2. I-Messages vs. You-Messages

Review the structure and uses of "I-Messages" with students:

- "I-Messages" state the feelings of the speaker and allow the receiver to change his/her behavior without feeling "blamed." The speaker takes responsibility and owns his/her feeling.
- "You-Messages" are accusing, judging and generally critical. The speaker blames others for his/her feelings. It puts the receiver on the defensive.

Have the students identify "I-Messages" and "You-Messages" and discuss the differences between the messages.

Examples of "I-Messages":

- "I feel frustrated when I'm trying to work and the television is playing too loudly because I can't concentrate."
- "I feel uncomfortable when someone criticizes me because I'm trying to do my best."

Examples of "You-Messages":
- "Turn down that television set!"
- "If you don't like the way I do it, then do it yourself!"

Have the students focus on a situation which is uncomfortable for them. Have them frame an "I-Message" to send. Have the students share the messages with the class.

**RESOURCES**

Teacher Reference:

Teacher Effectiveness Training
by Thomas Gordon

**SUBJECTS FOR COORDINATION**

English

Business Education

CONCEPT: Communication is influenced by our emotions and by skills in sending and receiving messages.

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

ACTIVITY 3. Fish Bowl

Have the students use a fish bowl technique to discuss a topic like, "A Positive Way I Handle A Feeling."

ACTIVITY 4. Appreciation Is Important

a. Seat the students in a circle. Have them state an appreciation for someone or something.

TEACHER INFORMATION

These simple sentence stems focus on "I-Messages."

Examples:

I appreciate my mother because... .
I appreciate my father because... .
I appreciate my friend __________ because... .

b. Lead a class discussion around the following questions:

- Why is it important to communicate feelings of appreciation?
- How does it feel when someone communicates appreciation to you?
- Have you ever felt that someone should express appreciation to you who did not do so?

c. Present the following situation to the class:

Jane did something for Tom, but Tom did not say or do anything to indicate whether he appreciated what Jane did. Have students pretend they are Jane and frame an "I-Message" to give to Tom.

ACTIVITY 5. Weekly Reaction Sheet

Have the students complete a weekly reaction sheet to monitor the communication of their feelings and needs. Encourage the students to record at least one incident a day for a week. At the end of a given time period, permit volunteers to share their 5 sheets.

Materials:

Weekly Reaction Sheet, p. 53

English

# Weekly Reaction Sheet

| Date | Feeling | Situation that caused the feeling | Did you communicate the feeling? | With whom did you share the feeling? What was the response? | With whom would you like to share the feeling? What response would you expect? | Your feelings at the end of the conversation | Evaluate the message. How can you improve it? |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
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## GRADES 10, 11, 12 CONCEPT III

CONCEPT: Communication is influenced by our emotions and by skills in sending and receiving messages.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | SUPPLEMENTARY ACTIVITIES: | Resource: | |
| | ACTIVITY 6. Feelings Bibliography<br>Have students identify books, pamphlets and articles that help people learn ways of handling feelings constructively. Students can work individually or in groups, compile their information, and print a bibliography for distribution or for publication in a school newspaper. Students could also work with the school librarian to prepare a display. | School Librarian<br>See Materials List for examples of student references for developing skills in handling feelings. | English |
| | ACTIVITY 7. Listening<br>Use a filmstrip to develop awareness of skills that can be learned to receive accurate messages from others. Have students practice giving and receiving messages in pairs and give their reactions to the experience. | Filmstrip Set:<br>"Now Hear This! Becoming A Better Listener" (The Skills Group) | |
| | ACTIVITY 8. Communicating With Parents<br>Use a filmstrip to develop awareness of how skills in sending messages can help prevent conflicts with parents. | Filmstrip Set:<br>"Adolescent Conflict: Parents vs Teen" (Sunburst Communications) | |
| | ACTIVITY 9. Saying No<br>Use a filmstrip to develop awareness of how skills in sending messages can help people learn to resist pressure from others to do things that do not meet their own best values. | Filmstrip Set:<br>"The Gentle Art of Saying No" (Sunburst Communications) | |
| TEACHER INFORMATION<br>The book opposite can be helpful to both teachers and students in developing assertiveness skills. | | Reference:<br>Asserting Yourself: A Practical Guide for Positive Change by Sharon Anthony Bower and Gordon H. Bower | |

**CONCEPT:** Communication is influenced by our emotions and by skills in sending and receiving messages.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| OBJECTIVE<br>**The students will explore the dynamics which occur in groups.** | ACTIVITY 1. Group Interaction Analysis<br>a. Group Process Information:<br>Have the students recall times when they were part of group discussions. Ask them to focus on a group discussion they participated in which was satisfying. Have several students briefly share these experiences with the class. Ask the students to provide reasons for their feelings about these group experiences.<br>Briefly state that certain interactions occur in group discussions, and that people play particular roles in groups. Explain that an understanding of what occurs in groups can help people to have more positive experiences within the group.<br>Distribute the Group Process Information Sheet. Read and discuss the information sheet with the students. Have the students link the information in the reading to their own experiences. | Teacher Reference:<br>Developing Effective Classroom Groups: A Practical Guide for Teachers by Gene Stanford<br>Materials:<br>Group Process Information Sheet, pp. 57, 59 (one per group) | |
| | b. Group Process Observation:<br>Divide students into small discussion groups. Appoint one member of each group as observer. Have this group member sit outside the group, observe what is occurring, and record the interactions of the group on the Group Process Observation Sheet. Assign each group a topic for discussion. | Materials:<br>Group Process Observation Sheet, pp. 61, 63 (one per group) | |

(Cont'd on page 65.)

# Group Process Information Sheet

People enjoy meeting in groups and expressing ideas and feelings. There are certain dynamics which occur in groups. Understanding group process can help you become a more effective group member.

There are two major concerns in a group -- content and process. Content involves the subject or task under discussion. Content usually involves sharing information, ideas and feelings. Process is concerned with what is happening between group members. Process focuses on participation, roles, leadership styles, patterns of communication, and climate.

Below are some guidelines about group behavior. As you read, try to recall your experiences in discussion groups.

## CONTENT

a. The Topic: A group usually has a topic to discuss. The topic should be one which interests the group members. The participants need some background knowledge and/or experience with the topic, and should have informed opinions. Have you ever been in a group where you knew very little about the topic under discussion? How did you feel? What did you do?

b. Adhering to the Topic: As the discussion progresses, the members should adhere to the assigned topic. Why does a group stray from a topic? Who is responsible for keeping the group focused on a topic?

## PROCESS

a. Participation: As the group proceeds in its discussion, ideas will be exchanged. One indication of involvement is verbal participation. Some people will express ideas; some people will listen to ideas. There are differences in the amount of participation among group members. Some participators express themselves frequently; other participators talk less and/or are silent. What might be some reasons for differences among group members in the amount of participation? Share a time when you have been an active participator. How did you feel? How did other members of the group feel about you? Share a time when you have been a nonactive participator. How did you feel? How did other members of the group feel about you?

b. Roles: Some members of a group try to influence other members. Perhaps you have been in groups where some people have acted in the following ways:

**Boss:** This person tries to tell you how to think and feel. When others speak this person judges their opinions and ideas.

**Peacemaker:** This person is uncomfortable where there is a difference of opinion or argument. When there is a problem, this person feels upset, and eagerly supports any decision which will end tension and discussion.

**Avoider:** This person seems to be bored, withdrawn and uninvolved. It is difficult to get this person to commit to an idea or decision. Only when someone asks a direct question, will this person respond.

**Distractor:** This person has funny things to say. When the discussion is serious, this person tries to capture attention by making faces, noises, moving about, talking about something else. Asking this person to pay attention only causes more fooling around.

**Harmonizer:** This person tries to include everyone in the discussion. This person expresses ideas and feelings openly. When a problem arises, this person tries to solve it in a fair and direct way.

What experiences can you recall with group members who acted in the above ways? Which role do you play in a group? What other roles can you add to the above list?

c. Leadership: Generally, a group has a leader. The style of the leader can influence a group. A leader can act as a boss, or a peacemaker; an avoider, a distractor or a harmonizer. How will each of these leadership styles influence the group?

d. Patterns of Communication: Sometimes all discussion moves through a leader. The leader calls on people to speak, and comments on what is said. Instead of speaking to each other, the group member speaks to the leader. Name some groups which use this communication pattern.

Sometimes a group member directs his/her ideas to the group. After each group member speaks, subsequent speakers comment on what was said, and add ideas of their own. The discussion occurs in an orderly way as if there were no leader. Name some groups which use this communication pattern.

Sometimes group members talk to each other. The group breaks up into smaller discussion groups as individuals share ideas. Name some groups which use this pattern of communication.

e. Climate: A feeling or tone exists in a group discussion. The group can be warm and friendly, or objective and business-like, or angry and hostile. Think of a group situation which you have experienced for each of the climates described. Share these situations with the class.

f. Other Variables: Other factors can affect group process. The size of the group, the place where the group meets and the time limit can help or hinder group process. Provide reasons why these factors might influence group process.

Now you are ready to use the Group Process Observation Sheet.

# Group Process Observation Sheet

You have been chosen as a group observer. As you watch the group discuss a topic, complete the following observation sheet. Be ready to share these observations with your classmates.

Discussion Topic: ____________________________________________

Time of Meeting: __________________ Place of Meeting: __________________

Number of Members in Group: ________

Check the appropriate description of the group you are observing:

CONTENT:

The members of the group appeared interested in the topic.

_____Very interested _____Interested _____Not interested

The members of the group had some knowledge and/or experience with the topic being discussed.

_____Very knowledgeable _____Average knowledge _____Lacked knowledge and/or experience

The members expressed their ideas and opinions of the topic being discussed.

_____Very open and sharing of ideas and opinions

_____Sharing of some ideas and opinions

_____Lack of sharing of ideas and opinions

The group members adhered to the topic being discussed.

_____Very close adherence to topic _____Adhered to topic with some side-tracking

_____Strayed from topic and discussed other things

Fill in the names of group members who are described by the following categories. You may have more than one name in each category:

## PROCESS:

### A. Participation:

Active Participation: ______________________

Less Active Participation: ______________________

Non-Participation: ______________________

### B. Roles:

Boss: ______________________

Peacemaker: ______________________

Avoider: ______________________

Distractor: ______________________

Harmonizer: ______________________

### C. Leadership:

Fill in the leadership style the leader used: ______________

Check the appropriate description of the group you are observing.

### D. Patterns of Communication:

Discussion was directed to the leader: ______________

Discussion was directed to the group: ______________

Discussion was directed to individual members of the group: ______

Other: ______________________

### E. Climate:

Warm and friendly: ______________________

Objective and business-like: ______________________

Angry and hostile: ______________________

Answer the following questions:

Did the group members listen to each other? ______________

Did most members participate? ______________________

Was the time allowed for discussion adequate? ______________

Did the size of the group permit free exchange of ideas? ______________

Did the meeting place influence the climate of the group? ______________

What feelings did you experience during your observations? ______________

How might you have changed the group? ______________________

**CONCEPT:** Communication is influenced by our emotions and by skills in sending and receiving messages.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|

ACTIVITY 1.b. (cont'd)

Possible Topics for Discussion:

"The Heroin Dealer"
- Who is he?
- What kind of money does he make?
- What kind of person must he be?

"People Communicate Feelings and Needs in Various Ways"
- What are some positive ways?
- What are some negative ways?
- What are the reactions to these ways?

"What I Do With Uncomfortable Feelings"
- What are some uncomfortable feelings?
- What are some ways of working with these feelings?

"How Emotions Can Interfere with Goal Achievement
- What can be done to prevent this interference?
- How can facts and feelings be recognized and separated?

c. Evaluation of Group Process:

At the end of the group discussion, have the observers report the information recorded on the Group Process Observation Sheets. Compare the various reports. Evaluate the group interactions, and have the students share "I learned..." statements.

**OBJECTIVE**

The students will discuss the dynamics which occur in relationships.

ACTIVITY 1. Levels of Relationships

Have the students list, and rank the importance of, their relationships with others. They may have relationships with family members, friends, teachers, team members, coaches, etc. Have them discuss the relationship which is most satisfying for them and provide reasons why. Ask the students to identify common ideas about positive elements in a relationship.

## GRADES 10, 11, 12 CONCEPT III

**CONCEPT: Communication is influenced by our emotions and by skills in sending and receiving messages.**

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | ACTIVITY 2. Relationships in Media<br>Have the class focus on relationships as portrayed in popular television shows and movies. Ask the students to list elements that are included in these shows as ingredients in a relationship. Have them evaluate these elements in terms of themselves and their needs, and form a statement about those elements which they would choose to include in their own relationships. | | Drama |
| | ACTIVITY 3. Traditional Roles<br>Have the class brainstorm roles associated with males and females in a relationship. Ask the students to discuss those roles which are comfortable or uncomfortable for them and provide reasons why they feel that way. Ask them to cite those roles which they would include in their own relationships. Have the students frame an "I learned..." statement. | | Home Economics<br>Sex Education |
| | ACTIVITY 4. Relationship Focus<br>Have the students focus on four relationships in which they are involved, and complete the worksheet, Relationship Focus. Explain that the list in column one should be rank ordered according to the importance of the relationship to them. | Materials:<br>Worksheet, Relationship Focus, p. 67 | English |
| | SUPPLEMENTARY ACTIVITY: | | |
| TEACHER INFORMATION<br>This activity would also work well in an English composition class as a writing assignment. | ACTIVITY 5. Guided Fantasy Trip<br>Have the students take a fantasy trip five years into the future, and plan an ideal day to spend with someone. Ask them to include the person they are with, the place they are, what they are doing, and their feelings about the day. Have the students identify the parts of the fantasy which they can control and plan for to increase the likelihood that they will occur. | | English |

# Worksheet: Relationship Focus

| List in rank order 4 people with whom you have a relationship | What I like about each relationship | What I am uncomfortable with in each relationship | How I would like to change each relationship |
|---|---|---|---|
| 1. ________ | | | |
| 2. ________ | | | |
| 3. ________ | | | |
| 4. ________ | | | |

GRADES 10, 11, 12 CONCEPT III

CONCEPT: Communication is influenced by our emotions and by skills in sending and receiving messages.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **OBJECTIVE**<br>**The students will explore ways in which substance abuse affects relationships.** | ACTIVITY 1. Role-Playing<br>Present situations where substance abuse can affect the relationship between individuals. Have students role-play the situations. Have the class focus on problems created by the substance abuse and discuss possible alternatives.<br>Examples of Situations:<br>- John drove his date, Felicia, and Mark and Melissa to a party. During the party John took downers and had a few drinks. He is unsteady on his feet and his speech is slurred. John insists that he will drive his own car and everyone home.<br>- Ben notices that certain personal items have been missing. Last night he thought he had $40 in his wallet. When he looked today, he found only $20 there. Now his watch is gone. For the last few weeks his younger brother has been acting strangely, and he had heard rumors that his brother was taking pills. The thought crosses his mind that his brother might be buying drugs. He hears his brother come in, and realizes he must confront him. | | Drama |
| | ACTIVITY 2. Fish Bowl<br>Using a fish bowl technique, have students discuss problems which occur in a relationship when substance abuse occurs.<br>Examples of Discussion Topics:<br>- "How does a parent who uses tranquilizers to handle feelings and problems affect relationships within the family?"<br>(Cont'd on next page.) | | Oral Expression |

CONCEPT: Communication is influenced by our emotions and by skills in sending and receiving messages.

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

ACTIVITY 2. (cont'd)

- "What can be the possible outcome for a team, and for individual members, going into the championship game, with three members of the team on amphetamines? The three individuals had partied all night, felt totally fatigued, and needed a lift for the game."

SUPPLEMENTARY ACTIVITY:

**TEACHER INFORMATION**

A student or group of students may want to prepare a report on the results of this activity for a school newspaper article.

ACTIVITY 3. Interview and Research

Have the students interview parents concerning their ideas and feelings about drug misuse and abuse in today's society. Draw up the interview questions with the students so that the questions reflect their concerns and interests.

Examples of Interview Questions:

- Why do you think people misuse/abuse drugs?
- Do you think marijuana use is more dangerous than alcohol use? Why or why not?
- Do you think a person who smokes a pack of cigarettes a day is a drug abuser?
- Do you think using sleeping pills or tranquilizers regularly is a form of drug abuse?
- What message would you like to give to a young person who is trying drugs?
- Would you find it difficult to communicate your feelings to such a person? Why or why not?

Social Studies

## CULMINATING CONCEPT EVALUATION ACTIVITY:

### My Reaction

Provide each student with a piece of paper. Explain to students that they are to number their papers from one to ten. For each number, read them a statement and have them write their reactions as "yes," "no" or "undecided." Then collect the papers and prepare a tally of student reactions for class discussion. Use results for future planning.

Statements for Student Reaction:

1. I feel more confident expressing my feelings and needs to others.
2. I don't think we need to talk about feelings.
3. I am comfortable sending "I-Messages."
4. "I-Messages" are something I will use in talking with others.
5. I am more aware of the "You-Messages" I send to others.
6. I am more aware of the feelings and needs of others.
7. I feel comfortable working in groups.
8. I feel more aware of the roles people play in groups.
9. I feel comfortable with most of the relationships I have with others.
10. I feel I can change my relationships with others.

## GRADES 10, 11, 12 CONCEPT IV

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| OBJECTIVE<br>The students will discuss that drugs are taken to change moods and feelings. | ACTIVITY 1. Medication for Moods and Feelings<br>a. Brainstorming and Discussion:<br>Have the students brainstorm a list of reasons for taking drugs. Then have students identify all reasons listed that have to do with altering moods and feelings.<br>Ask students the question: "Are certain drugs taken to produce certain feelings?" Discuss.<br>b. Graphing Feelings:<br>Write on the chalkboard the following drugs that are taken to change moods and feelings:<br>marijuana caffeine<br>alcohol heroin<br>Valium cocaine<br>Have students use a balance graph (Plot the Drug Reaction, p. 27) to illustrate graphically the effects of medication with each of these drugs for moods and feelings. Have students relate the psychological effects to the physical effects graphed under Concept I of the curriculum. | Teacher References:<br>Drug Education: Content and Methods by Daniel A. Girdano and Dorothy Dusek, Chapter 1.<br>Medicines and Drugs by Brent Q. Hafen and Brenda Peterson, Chapter 8.<br>Materials:<br>Worksheet: Plot the Drug Reaction, p. 27 | |
| TEACHER INFORMATION<br>Some individuals have body physiologies that react in a reverse fashion to a drug, or produce reactions not felt by others. A drug allergy is an | ACTIVITY 2. Individual Moods and Feelings (Discussion)<br>Explain to the class that drugs taken to alter moods and feelings may affect individuals in different ways. Ask students if they can identify some factors that influence how an individual's feelings will be affected by a drug.<br>(Cont'd on next page.) | Teacher References:<br>See above | |

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **TEACHER INFORMATION**<br>extreme example of this situation, where the body reacts violently to the administration of a drug. Mood reactions to drugs are affected by many factors, particularly the expectations of the person taking the drug. | ACTIVITY 2. (cont'd)<br>Examples:<br>- individual physiology<br>- allergies<br>- past experiences<br>- mood at time drug is taken<br>- setting in which drug is taken | | |
| **OBJECTIVE**<br>The students will identify activities which are alternatives to drug use. | ACTIVITY 1. Balance Graph<br>Have the students illustrate on the worksheet, Plot the Drug Reaction, the tension changes caused by the following activities:<br>dancing — painting<br>meditation — roller skating<br>running track — basketball<br>Have the students compare the graphs for these activities to graphs which illustrate tension changes from drug use. (See worksheets: Tension Changes, Depressant; Tension Changes, Stimulant.) Elicit from the students the similarities and differences between the graphs. Have the students discuss how certain activities can produce mood and feeling changes and be alternatives to drug use. | Teacher Reference:<br>Appendix A: The Alternatives Concept<br>Materials:<br>Worksheets: Plot the Drug Reaction, p. 27<br>Tension Changes, (Depressant) p. 19<br>Tension Changes, (Stimulant) p. 21 | |
| | ACTIVITY 2. Alternatives<br>Have the students create their own alternatives charts. Each student is to identify three activities s/he might select as alternative solutions to a problem, and the advantages and disadvantages of each. | Materials:<br>Worksheet: Recognizing Alternatives, p. 75 | |

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | ACTIVITY 3. Happiness Is (Listing)<br>Have the students prepare a list of words which they associate with feeling happy or with feeling good about themselves. Then have students personally identify things or activities that make them feel happy or good about themselves. | | English<br>(Vocabulary) |
| | ACTIVITY 4. Collage<br>Have the students create a collage of alternatives to drug misuse/abuse and share these with the class. | Materials;<br>Magazines, scissors, glue, or other materials for collage-making | Art |
| | SUPPLEMENTARY ACTIVITIES: | | |
| | ACTIVITY 5. Bored<br>Students frequently complain they are bored and restless. Have the students plan a project that will be interesting and satisfying. Brainstorming in small groups can preceed planning. | | |
| | ACTIVITY 6. Filmstrip<br>Use a filmstrip to develop awareness of alternative highs to drug misuse/abuse. Have students discuss or write an essay on what it means to be "high on life." | Filmstrip:<br>"High On Life" (Guidance Associates) | English |
| TEACHER INFORMATION<br>The teacher should preview this thought-provoking film, and plan for leading the lively discussion that should follow. | ACTIVITY 7. Film<br>Show a film which dramatizes the contrast between a young man who seeks escape from life through the use of drugs and an old man he encounters whose philosophy is to be involved with living until he dies. | Film:<br>"Up Pill, Down Pill" (BFA Educational Media) | |

# Worksheet: Recognizing Alternatives

Problem ____________________________________________

Attitude and Feelings concerning problem ____________________
____________________________________________________

Solutions:

Alternative 1: ______________________________________

| Advantages | Disadvantages |
|---|---|
| ____________ | ____________ |
| ____________ | ____________ |
| ____________ | ____________ |

Alternative 2: ______________________________________

| Advantages | Disadvantages |
|---|---|
| ____________ | ____________ |
| ____________ | ____________ |
| ____________ | ____________ |

Alternative 3: ______________________________________

| Advantages | Disadvantages |
|---|---|
| ____________ | ____________ |
| ____________ | ____________ |
| ____________ | ____________ |

Choice ______ because ________________________________

How might the feeling affect the decision ________________
____________________________________________________
____________________________________________________.

GRADES 10, 11, 12 CONCEPT IV

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

## OBJ. & TEACHER INFO.

### OBJECTIVE

Students will explore ways of dealing with distress and pressure without the use of drugs.

### TEACHER INFORMATION

Stress may be healthy or unhealthy. Eustress is a positive form of stress--that which stimulates growth and change. Distress is a negative form, causing discomfort and feelings of loss of control.

## LEARNING ACTIVITIES

ACTIVITY 1. My Distress Symptoms

a. Write the word "stress" on the chalkboard. Ask students to brainstorm other words brought to mind by this word. (e.g.: tension, pressure, anxiety, nervousness). Then write "eustress" and "distress" on the board, and explain how these forms of stress differ.

b. Have students write down things they experience and/or do when they feeling distress. Then present students with the following things people experience and do when they feel distress:

- overeating
- loss of appetite
- irritability
- headaches
- difficulty sleeping
- tiredness
- diarrhea
- constipation
- cold hands
- sweaty palms
- inappropriate laughter
- stuttering
- bursts of nervous energy
- illnesses
- inability to concentrate
- obsession with one subject or thing
- drinking alcoholic beverages in excess
- smoking
- forgetfulness

Have students compare their lists with the list presented.

c. Explain to students that the distress we experience is frequently the result of a negative message we are giving ourselves (the way we interpret an event and our attitude toward that event).

(Cont'd on next page.)

## RESOURCES

Teacher & Student References:

Learning to Control Stress by M.W. Buckalew, Jr.
Controlling Stress & Tension by Daniel A. Girdano and George Everly
Stress Without Distress by Hans Selye

Low Reading Level Reference:

"About Stress" (Channing L. Bete)

## SUBJECTS FOR COORDINATION

TEACHER INFO. (cont'd)

The experience of emotional distress is frequently subjecttive, i.e. it depends on how an individual interprets an event. Therefore, many experiences may be eustressful for some people and distressful for others.

TEACHER INFORMATION

People who see change as a challenge; feel commitment and not alienation in work or school situations; and who feel control over the events of daily life experience eustress more frequently than people without these attitudes.

ACTIVITY 1.c. (cont'd)

For example, if we experience distress in anticipation of a test, it may mean that we are giving ourselves one or more of the following negative messages:

- "I'm not smart enough to pass the test."
- "I haven't studied hard enough to pass the test."
- "If I don't pass the test, I won't pass this class."
- "I never do well on tests."

Have students focus on a distressful experience they have had and identify a negative message they were giving themselves. Ask students who are willing to share their experiences and messages with the class to do so.

d. Explain to the students that it is possible to change the messages we send ourselves from negative messages to positive ones, thereby reducing distress. For example, in anticipation of a test, the message could be one or more of the following:

- "I will set aside some time to study and do the best I can."
- "I will do better if I don't let it upset me."
- "One test is not that important. It's the overall picture that counts."
- "I can do as well as anyone else."

(Cont'd on next page.)

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

OBJ. & TEACHER INFO. LEARNING ACTIVITIES RESOURCES SUBJECTS FOR COORDINATION

## TEACHER INFORMATION

**When the body feels distress, a "fight or flight" response occurs. When faced with situations that the individual views as threatening, an involuntary response increases blood pressure, heart rate, breathing rate, blood flow and metabolic rate. The body prepares to run away or stand and fight. The "fight or flight" response is automatic and prepares the individual for self-defense.**

**Everyone possess a protective mechanism which counters the effects of distress. It is a relaxation response which decreases the physiological symptoms. An individual can learn to evoke this response through relaxation techniques (meditation, imagery, and cognitive restructuring).**

ACTIVITY 1. (cont'd)

Have students change the negative messages they identified for their own experiences to positive messages. Ask students who are willing to share to report their message changes to the class.

Discuss with students that many of the distressful messages are habits of thinking. When they become aware of these messages they can begin to change them to more positive messages.

ACTIVITY 2. Relaxation Exercise

Explain to the students that it is possible to minimize the negative effects of distress by learning and practising a relaxation exercise.

On the chalkboard, write the four basic components of a relaxation exercise, and discuss each:

1. A quiet environment
2. A mental device to keep your mind from wandering. It can be a sound, word or phrase repeated silently
3. A passive attitude toward distracting thoughts
4. A comfortable position

Lead the class in a relaxation exercise. Give the following directions in a quiet voice at an unhurried pace:

1. Sit quietly in a comfortable position
2. Close your eyes
3. Relax all your muscles, beginning at your feet and progressing up to your face. Relax your

(Cont'd on next page.)

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

ACTIVITY 2. (cont'd)

feet...ankles...legs...knees...hips...etc. Feel the tension leave your body as you relax

4. Breathe deeply through your nose. As you breathe, think "In" and take a deep breath into your lungs; "Out" and exhale slowly. "In" ..."Out"..."In"..."Out" (Help the students breathe in a slow steady motion.)
5. Continue to relax until time is called (Allow the students time to practice the relaxation exercise.)
6. Open your eyes; sit quietly for a few minutes - Think about how you feel.

Discuss with the students their feelings at the end of the exercise. Explain to the students that they can repeat this technique whenever they need to relax.

**TEACHER INFORMATION**

Distress reactions change during the day. Distress may occur at certain times, in certain places, or under certain conditions. It can be helpful to monitor the distress in order to determine patterns. The following are four conditions that may increase distress, depending on how these conditions are experienced at any given time:

Self-talk distress results from self-imposed demands and performance expectations. The "shoulds" that people tell

(Cont'd on next page.)

ACTIVITY 3. Monitoring Distress

Duplicate the worksheet, Monitoring Distress Graph, and distribute to the class. Explain how to use the graph to measure and record distress reactions over a period of time. Have students estimate and chart their distress reactions each day for a week. At the end of the week, have them look for patterns of distress on their charts. Invite volunteers to share their discoveries with the class.

Follow-up with a discussion of the four conditions of distress--self-talk, social, environmental, and drug-induced--and how each may be alleviated.

Examples:

Selt-Talk Distress: change negative messages to positive messages; role-play with self to estab-

(Cont'd on next page.)

Materials:

Worksheet, Monitoring Distress Graph, p. 81

# Monitoring Distress Graph

Monitor levels of distress at different times of the day. Place the symbol which describes your conditions of distress at the appropriate place on the graph.

| | | Morning | Afternoon | Night | Sleep |
|---|---|---|---|---|---|
| Saturday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |
| Friday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |
| Thursday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |
| Wednesday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |
| Tuesday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |
| Monday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |
| Sunday | High distress | | | | |
| | Moderate distress | | | | |
| | No distress | | | | |

Conditions of Distress:

● Self talk distress
× Social distress
▲ Environmental distress
✱ Drug induced distress

GRADES 10, 11, 12 CONCEPT IV

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFO. (cont'd) | ACTIVITY 3. (cont'd) | | |
| themselves cause internal distress. | lish clearer thinking; share your thoughts with a positive-thinking friend. | | |
| Social distress results from interaction with people. Conflicts with others or working with aggressive people can produce social distress. | Social Distress: use assertiveness techniques, I-Messages, active listening.<br>Environmental Distress: use relaxation techniques; change environment; become involved in community action. | | |
| Environmental distress results from a physical environment that is anxiety-producing. Temperature (too hot/too cold), noise (too loud/too quiet), and light (too bright/too dark) are a few environmental distressors. | Drug-Induced Distress: learn effects and side-effects of drugs, withdrawal symptoms and their causes; check with doctor when unpredicted or severe reactions occur. | | |
| | SUPPLEMENTARY ACTIVITIES: | | |
| | ACTIVITY 4. Filmstrip<br>Show a filmstrip that discusses the causes and effects of psychological stress. Have students submit reports summarizing the main points. | Filmstrip:<br>"Dealing with Stress" (Sunburst communications) | |
| Drug-induced distress results from the change in homeostasis that occurs when certain drugs are taken. | ACTIVITY 5. Videotape<br>Show and discuss film "Journey Through Stress." The accompanying guide contains discussion questions and suggested activities. | Videotape:<br>"Journey Through Stress" from On the Level Series (Bureau of Mass Communications) | |
| | ACTIVITY 6. Sound-Slide Program<br>Show sound-slide program and use teacher's guide to identify discussion questions and related activities. | Sound-Slide Program:<br>"Keeping Cool: How to Deal With Stress" (Center for Humanities) | |

**CONCEPT:** Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION

**OBJECTIVE**

The students will practice decision-making with a problem-solving model which is comfortable for them.

**TEACHER INFORMATION**

Refer to the introductory section, A Sampling of Teaching Methods, p. xviii, for a more detailed discussion of these problem-solving models.

ACTIVITY 1. Handling Problems

Ask the students to explore their past experiences in resolving problems. After focusing on problem situations which have confronted them, have them complete the worksheet, Handling Problems.

ACTIVITY 2. Problem-Solving

Review the following problem-solving/decision-making models with the students:

Traditional Model:

- State the problem
- Define the specifics of the problem
- Brainstorm possible solutions
- Identify the consequences
- Choose a solution

Force-Field Analysis:

- Identify your goal
- List all the forces that will help you achieve your goal
- List all the forces that will interfere with attaining your goal
- Plan a strategy for overcoming the forces that are preventing you from reaching your goal
- Move on to one of the strategies

Have the students discuss which model would be comfortable for them and why.

Materials:

Worksheet, Handling Problems, p. 85

# Worksheet : Handling Problems

| A Problem I Have Had | How I Attempted to Resolve the Problem | The Final Outcome |
|---|---|---|
| | | |

**CONCEPT:** Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | ACTIVITY 3. Decision-Making Practice<br>Present the class with the models described in Activity 2 for problem-solving/decision making. Have students demonstrate how the models can be used to solve problems and make decisions in specific situations.<br>Examples of Situations:<br>- Patty has a choice of two after school jobs. She can work for a dentist or at a local dress shop. How should she decide which job to take?<br>- Teresa's friends are going to a disco where she has been forbidden to go by her parents. How should she decide whether to go with them?<br>- It is six weeks until graduation and Kurt doesn't know what to do with his future. How should he decide?<br>- Duncan has found pills in his younger brother's desk. Because of the amount of pills found, Duncan is afraid his brother is selling as well as possibly using the drug. How should Duncan decide what to do? | | Oral Expression |
| | ACTIVITY 4. Problems<br>Have students refer back to the worksheet, Handling Problems, they completed for Activity 1, to evaluate the problem-solving process they used in the past. Review the Traditional Model and the Force Field Analysis Model for problem-solving. Have the students locate similarities and differences in these approaches and the approaches they used. Ask students to consider whether the use of one of these models might have improved the final outcome. | Materials:<br>Worksheet: Handling Problems, p. 85 | |

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | SUPPLEMENTARY ACTIVITY: | | |
| **TEACHER INFORMATION**<br>**"Alternate Route" deals with the ability to think clearly in a frightening situation. Other films in this series that deal with problem-solving/decision-making include:**<br>**"Face to Face" (avoidance of conflict situations);**<br>**"Surrounded" (peer group membership and risk-taking);**<br>**"Behind the Scenes" (expressing feelings and risk-taking).** | ACTIVITY 5. Videotape<br>Show and discuss the film "Alternate Route." The accompanying guide contains discussion questions and suggested activities. | Videotape:<br>"Alternate Route" from On the Level series (Bureau of Mass Communications) | |
| | ACTIVITY 6. Advice Column<br>Students may enjoy practicing problem-solving with the guidance of a fictional advice columnist, "Uncle Gus." My Problem Is ... contains discussions, writing assignments and other exercises in evaluating and resolving the everyday problems that people write to newspaper columnists. | Worktext:<br>My Problem Is ... by Margaret Dewey | |
| **OBJECTIVE**<br>**Students will discuss how their health, life style and life span may be influenced by their decisions about substance use.** | ACTIVITY 1. A Deadly Game, What are the Odds?<br>Have students gather statistical information from life insurance companies regarding life expectancy projections for smokers vs. nonsmokers, drinkers vs. nondrinkers, overweight vs. nonoverweight persons, etc. and present a statistical chart of their findings. Discuss. | Resource:<br>Life insurance companies | Mathematics |
| | ACTIVITY 2. Biographies<br>Have the students research and present reports about the lives and careers of popular entertainment figures whose deaths resulted from drug abuse (Janis Joplin, Jimi Hendrix, Judy Garland, Freddie Prinze, Elvis Presley, etc.). Discuss how their lives and careers were influenced by substance abuse. | | English |

GRADES 10, 11, 12 CONCEPT IV

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| | SUPPLEMENTARY ACTIVITY:<br>ACTIVITY 3. Film<br>Show and discuss film, "Rosie Grier: The Courage to Be Me" about an athlete who overcame several obstacles using positive coping skills. | Film:<br>"Rosie Grier - The Courage to Be Me" (Churchill Films) | |
| OBJECTIVE<br>Students will develop a model for health and describe how decisions made now may affect health in the future. | ACTIVITY 1. Healthy People<br>Students will prepare a collage of their perceptions and representation of what healthy people look like. It is important that they include persons of various stages of life in this collage, not just teenagers and young adults. | Materials:<br>Magazines<br>Scissors<br>Glue<br>Posterboard<br>Marker | Art |
| TEACHER INFORMATION<br>Some of the decisions we make today about our lives and our health have significan effects on our future. Some people find it difficult to understand that today's actions may be tomorrow's problems. Developing a lifelong plan for optimal health provides students with a perspective on how health behavior and decisions can affect different periods of a lifetime. This activity could be used for an in-depth study of the changing responsibilities and health choices a person makes in a lifetime for him/herself and loved ones. | ACTIVITY 2. Group Work<br>a. Divide the class into groups of 6-8. Have each group select a chairperson who will be responsible for coordinating the activity and presenting the group's product to the class.<br>b. Ask each group to list or brainstorm all the factors present in a person's life that affect his/her health. Groups should categorize their lists into main topics with subtopics. (Examples of main topics could include: family; peers; personal health behaviors - mental and physical; school; job or career; social clubs; religious and spiritual development; leisure, etc.) | Teacher Reference:<br>*Developing Effective Classroom Groups* by Gene Stanford | |

(Cont'd on next page.)

## GRADES 10, 11, 12 CONCEPT IV

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| TEACHER INFO. cont'd.<br>This activity is also included in the Tobacco Education Curriculum. | ACTIVITY 2. (cont'd)<br>c. Provide each student with four sheets of paper. Instruct students to divide each sheet into three columns, label the columns as they are in the model given, and label the sheets "Life-Long Plan for Optimal Health." (Teacher may want to provide students with forms already printed to save time).<br>As a group, have the students discuss and list those practices or actions which are important for each main topic for each age group and come up with a plan representing the concensus of the group. Then have each group present their Life-Long Plan to the class.<br>d. Have the class list those elements common to all or most of their models and explain why these practices or actions were chosen. | Materials:<br>Model for A Life-Long Plan for Optimal Health, p. 91<br>Four sheets of paper per student (or printed forms) | |
| | SUPPLEMENTARY ACTIVITY: | | |
| TEACHER INFORMATION<br>This activity requires previewing of the filmstrips and a plan for directing discussion. The teacher's guides offer discussion questions, but do not specifically address drug issues. | ACTIVITY 3. Filmstrip<br>Show one of the filmstrips opposite (or another similar filmstrip) and have students relate the life tasks discussed to decisions regarding drug use. | Filmstrips:<br>"Becoming Responsible"<br>"Life Goals: Setting Personal Priorities"<br>(Human Relations Media) | Career Education |
| | ACTIVITY 4. Self-Management Worksheets<br>Students may benefit from completing their own selections from 48 exercises designed to develop specific life-management skills. (Examples of titles: "A Personal Philosophy of Life;" "Compensating for Personal Limitations;" "Relating to My Parents.") | Spirit Masters:<br>Managing Yourself by E. Richard Churchill and Linda R. Churchill | Career Education |

## MODEL FOR A LIFE-LONG PLAN FOR OPTIMAL HEALTH

PAGE 1

| LIFE-LONG PLAN FOR OPTIMAL HEALTH | | |
|---|---|---|
| HEALTH FACTORS | BIRTH - AGE 5 | GRADES K-6 |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |

PAGE 2

| LIFE-LONG PLAN FOR OPTIMAL HEALTH | | |
|---|---|---|
| JUNIOR HIGH | SENIOR HIGH | AGES 18-22 |
| | | |

PAGE 3

| LIFE-LONG PLAN FOR OPTIMAL HEALTH | | |
|---|---|---|
| AGES 22-30 | AGES 30-50 | AGES 50-65 |
| | | |

PAGE 4

| LIFE-LONG PLAN FOR OPTIMAL HEALTH | |
|---|---|
| RETIREMENT | I LEARNED THAT . . . |
| | |

GRADES 10, 11, 12 CONCEPT IV

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|
| **OBJECTIVE**<br>The students will identify sources of help and support within their own community. | ACTIVITY 1. Community Directory<br>Have students research sources of help and support for people with various problems and publish their findings in a directory for reference by others. | **References:**<br>"Your Community Health Center & You" (U.S. Government Printing Office)<br>*Youthbook* (Citizen's Committee for New York City) | Social Studies |
| **TEACHER INFORMATION**<br>All students should be aware of sources of help and procedures for getting help, whether or not they have current problems which require professional assistance. Events in people's lives which may precipitate the need for help are frequently unpredictable. | ACTIVITY 2. When to Get Help<br>Invite a school psychologist (or one from the community or a nearby college) or social worker to speak to the class about making a decision to seek help.<br>Some Discussion Questions:<br>1. What kinds of problems should I solve on my own?<br>2. When should friends or family members be consulted?<br>3. What kinds of problems should I seek help for from school or community sources?<br>4. What alternative actions are available to me when an attempt at seeking help doesn't work out? | **Resource Person:**<br>Psychologist or social worker | |
| | SUPPLEMENTARY ACTIVITY: | | |
| **TEACHER INFORMATION**<br>This filmstrip could be used as an introduction to this section. | ACTIVITY 3. Filmstrip<br>Show a filmstrip to develop awareness of general sources of help for students who need assistance or support of various kinds. Follow-up with a discussion of local school and community sources. | **Filmstrip Set:**<br>"Who Can Help You" (Guidance Associates) | Social Studies |

CONCEPT: Identifying motivations for drug misuse and abuse can help us find alternatives for changing feelings and meeting needs.

| OBJ. & TEACHER INFO. | LEARNING ACTIVITIES | RESOURCES | SUBJECTS FOR COORDINATION |
|---|---|---|---|

CULMINATING CONCEPT EVALUATION ACTIVITY:

Improving the Drug Curriculum

Explain to the students that, now that they have completed the drug curriculum, they have the opportunity to make the curriculum more meaningful for other students. Ask them to complete a survey which will be used in future planning.

Example of Survey Items:

- List two things you enjoyed doing.
- List two things you learned about substance use/misuse/abuse that you think were important.
- List something you would have liked to spend more time on.
- List two ways you would improve the curriculum.
- List a topic you would like added to the curriculum.
- List one way your thinking about substance use/misuse/abuse has changed.

## THE ALTERNATIVES CONCEPT

The alternatives concept is based on the assumption that substance misuse and abuse occur when people select substances to meet needs which may be better, or more healthfully, met through alternative means. If the individual can be encouraged to identify the specific needs being met by substance misuse or abuse, it should be possible to identify alternatives to drugs for the individual that will meet these needs without the unhealthy consequences which accompany substance misuse and abuse.

While reasons for substance misuse and abuse vary, individuals frequently cite boredom, frustration, powerlessness, pain and a lack of hope for change as motivations. Alternative activities should be provided in the community which involve young people as active participants with responsibilities and opportunities for growth, achievement and contact with positive role models. Individual identity, self-reliance and feelings of self-worth grow from thinking about, planning and doing worthwhile things. Some examples of programs which are based on the alternatives concept are the following:

ALTERNATIVES 2, Florida Ocean Science Institute, 1605 South East Third Court, Deerfield Beach, FL 33441. Involves youth with marine life and skills development in the areas of scuba diving, boat building, etc.

EL TEATRO ESPITITU DE ASTLAN, P.O. Box 592, Placintia, CA 92670. Involves youth in theater-operated techniques such as improvisations, skits, psychodrama and videotaping.

GLOUCESTER EXPERIMENT, Gloucester, MA 01930. Involves youth in all aspects of restoration projects.

OUTWARD BOUND, INC., National Office, 384 Field Point Road, Greenwich, CT 06830.

PROJECT ADVENTURE, P.O. Box 157, Hamilton, MA 01936.

SPARK PROGRAM, New York City Board of Education, 110 Livingston Street, New York, NY 11201. Encourages student decision-making and intellectual, social, cultural and recreational activities as alternatives to drug misuse.

Several activities in the middle and high school grades of this curriculum provide opportunities for youngsters to identify personal alternatives to drugs for meeting needs and handling problems. The list provided on the following pages provides examples for the teacher that are more detailed. This list may serve as a point of departure for class discussion, as a reference for use by individuals, or as a reference for use in developing local alternatives programs.

## SOME REFERENCES ON ALTERNATIVES

Cohen, Allan Y. Alternatives to Drug Abuse: Steps Toward Prevention. Madison, WI: Wisconsin Clearinghouse for Alcohol and Other Drug Information, 1975. $.35.

Cohen, Allan Y. The Journey Beyond Trips: Alternatives to Drugs. Center City, MN: Hazelden Educational Services, 1971, $.60.

Glasser, William, M.D. Positive Addiction. Harper & Row Publishers, 10 East 53rd Street, New York, NY 10022, 1976. $8.95.

## THE ALTERNATIVES CONCEPT, CONT'D

Messolonghites, Louisa, Editor. Alternative Pursuits for America's 3rd Century. Washington, DC: U.S. Government Printing Office (SN 017-024-00333-6), 1977. $3.10.

National Institute of Mental Health. Effective Coordination of Drug Abuse Programs. A Guide to Community Action, Chapter VII: "Conclusions: Developing Alternatives to Drug Abuse", April 1973.

Silverstein, Lee M. Consider the Alternative. CompCare Publications, P.O. Box 27777, Minneapolis, MN 55427. $5.95.

## ALTERNATIVES CHART

| Level of Experience | Effect Being Sought | Most Probable Drugs of Abuse | Alternative Examples |
|---|---|---|---|
| Physical | Relaxation | Alcohol, tranquilizers marijuana, barbiturates | Listening to music<br>Yoga<br>Floor exercise<br>Dance and movement training<br>Swimming, fishing<br>Gardening |
| | Relief from pain | Prescribed drugs, OTC drugs, illegal drugs | Self-hypnosis<br>Biofeedback<br>Exercise (for pain caused by tension) |
| | Prevention of sickness | OTC drugs, prescribed drugs | Individual physical conditioning, (jogging, exercise, hiking, biking, walking, etc.)<br>Proper nutrition<br>Sanitation, hygiene |
| | Increased physical energy | Amphetamines, stimulants (cocaine, nicotine, etc.) | Experience in the martial arts (karate, judo, etc.)<br>Competitive athletics<br>Individual physical conditioning, running, bicycling<br>Aerobic dancing<br>Dietary adjustments |

## ALTERNATIVES CHART, CONT'D

| Level of Experience | Effect Being Sought | Most Probable Drugs of Abuse | Alternative Examples |
|---|---|---|---|
| Sensory | Enhancement of sensual experiences (intensification and enrichment of sound, touch, sight, smell and taste) | Hallucinogens (marijuana, STP), cocaine | Creative hobbies (photography, handicrafts, printing, cooking, ceramics, music, perfume making, sachet making, etc.)<br>Physical activity (bathing, swimming)<br>Birdwatching, nature study<br>Plant, seashell, rock, stamp collecting<br>Walking barefoot in sand, mud, grass or a stream |
| Creative/Aesthetic | Increased creative ability and enjoyment | Hallucinogens, stimulants | Creative hobbies<br>Planning and implementing art shows, plays, etc.<br>Restoration of neighborhood<br>Apprenticeship with local artists, musicians, craftsmen, actors, etc.<br>Non-graded instruction |
| | Enhancement of imagination | Hallucinogens, amphetamines | Theater games<br>Fiction writing<br>Visiting museums, exhibitions, fairs<br>Experimenting with art materials |

## ALTERNATIVES CHART, CONT'D

| Level of Experience | Effect Being Sought | Most Probable Drugs of Abuse | Alternative Examples |
|---|---|---|---|
| Mental/Intellectual/Spiritual | Ease in problem-solving | All drugs | Self-hypnosis<br>Relaxation techniques<br>Practice in use of problem-solving techniques<br>Memory Training |
| | Insight into self | Hallucinogens | Group process, counseling<br>Peer counseling<br>Reading biographies, self-help articles and books |
| | Avoiding mental fatigue | Stimulants | Physical activity<br>Political campaign work<br>Play chess<br>Play a musicial instrument<br>Tutoring |
| | Search for purpose and meaning in life, and a personal identity | Hallucinogens | Reading<br>Meditation<br>Study of world religions<br>Contemplation<br>Gardening<br>Nature Study<br>Participation in religious activities |
| | Desire for higher levels of consciousness | Hallucinogens | Poetry writing<br>Spiritual dance and song<br>Meditation |

## ALTERNATIVES CHART, CONT'D

| Level of Experience | Effect Being Sought | Most Probable Drugs of Abuse | Alternative Examples |
|---|---|---|---|
| Emotional | Reduction of stress, tension, anxiety loneliness | Tranquilizers, barbiturates, marijuana, alcohol | Peer counseling<br>Relaxation techniques<br>Biofeedback<br>Volunteer work as Big Brother/Sister<br>Storytelling |
| | Avoidance of problems and decisions | All drugs, including combinations of drugs | Supervised psychodrama<br>Peer counseling<br>Problem-solving skills development |
| | Relaxation and mood alteration | Marijuana, alcohol, tranquilizers barbiturates | Relaxation techniques such as imagery, guided fantasy<br>Biofeedback<br>Religious experience |
| | Relaxation of inhibitions | All drugs, especially alcohol | Meditation<br>Yoga<br>Cloud-watching |
| | Need for privacy | Hallucinogens, barbiturates | Gardening, farming<br>Camping, backpacking |
| Social/Political | Peer pressure; need to feel a sense of belonging | All drugs, including combinations of drugs | Team sports<br>Committee or volunteer work<br>Political campaign work |
| | Rebellion, defiance, assertion/independence | All drugs, especially illegal substances | Auto and motorcycle repair, racing<br>Volunteer work<br>Recycling and working to improve environment<br>Political campaign work |
| | Promote social change | Marijuana, barbiturates, alcohol | Volunteer work; social service<br>Tutoring<br>Ecology action<br>Run for office; political field work |

## ALTERNATIVES CHART, CONT'D

| Level of Experience | Effect Being Sought | Most Probable Drugs of Abuse | Alternative Examples |
|---|---|---|---|
| Recreational | Escape from boredom | All drugs, including combinations of drugs | Joining a school club<br>Team sports<br>Apprenticeship<br>Body building<br>Hiking, walking<br>Hobbies, puzzles |
| | Curiosity | All drugs, including mixing drugs | Science lab work<br>Gardening<br>Building and flying model aircraft<br>Skin and scuba diving<br>Exploring |
| | Excitement, a new experience, a high, a changed perception | All drugs including mixing drugs | Tutoring<br>Collecting<br>Roller skating<br>Ice skating<br>Biking<br>Cooking<br>Running |
| | Need for risk-taking, adventure | All drugs, including mixing drugs | Skin and scuba diving<br>Mountain climbing<br>Debating<br>Environmental work<br>Travel<br>Speluncing<br>Hot-air ballooning<br>White-water canoeing, kayaking<br>Orienteering |

## PEER LEADERSHIP PROGRAMS

Peer leadership programs use the impact and modeling characteristics of peers to influence same age or younger students in developing attitudinal and behavior patterns. Peer leaders may be particularly effective in areas such as substance abuse where the information and guidance provided by adult teachers may be viewed by some students with suspicion, or as irrelevant to the problems young people share.

Where peer leadership methods are used, participating leaders should be carefully selected and trained to insure that they have a positive influence on the children they lead. Many program variations are possible - classroom presentations, group discussion-leading, and individual support are some examples - and peer leaders need to acquire specific skills for each function they perform.

School administrators, teachers, students and parents should all be involved in the planning and implementation of a peer leadership program. For further information, consult one or more of the references listed below.

### REFERENCES ON PEER LEADERSHIP

Brown, William. Student-to-Student Counseling. An Approach to Motivating Academic Achievement (Revised Edition). Hogg Foundation Research Series. Austin: University of Texas Press, 1977. $10.95.

Fletcher, Kenneth R., et. al. Extend: Youth Reaching Youth. Minneapolis, MN: Augsburg Publishing House, 1974. $3.95.

Hebeisen, Ardyth. Peer Programs for Youth. Minneapolis, MN: Augsburg Publishing House, 1973. $3.50.

Myrick, Robert and Tom Erney. Caring and Sharing. Minneapolis, MN: Educational Media Corp., 1978. $6.95.

________. Youth Helping Youth: A Handbook for Training Peer Facilitators. Minneapolis, MN: Educational Media Corp., 1979. $6.95.

National Institute on Drug Abuse. Teen Involvement for Drug Abuse Prevention. Washington, D.C.: U.S. Government Printing House (SN 017-024-00714-5), 1978. $2.75.

National Institute on Drug Abuse. Teen Involvement for Drug Abuse Prevention - Administrators Guide. Washington, D.C.: U.S. Government Printing House (SN 017-024-00713-7), 1978. $1.60.

Samuels, Don and Mimi Samuels. The Complete Handbook of Peer Counseling. Atlanta, GA: SAAETP, Inc., 1975. $5.95. (A classic reference; also available from CompCare Publications and Hazelden Educational Services.)

# PACKAGED PROGRAMS FOR HEALTH AND DRUG EDUCATION

## Nationally-Validated Programs for Drug Abuse Prevention

### THE ME/ME DRUG PREVENTION EDUCATION PROGRAM

ME/ME is a drug prevention/education program for elementary level children (grades 2-6). The program focuses on the reasons why people abuse drugs rather than on the drugs themselves. Activities are student-centered; they emphasize decision-making, values, self-concept, and attitude development. ME/ME is implemented by regular classroom teachers after a six-hour training session by Project ME/ME staff. Details regarding the ME/ME program may be obtained from Artie Kearney, Director, ME/ME Project, 400 South Linwood Avenue,, Appleton, Wisconsin 54911 or the Bureau of Drug Education, New York State Education Department, Room 960 EBA, Albany, New York 12234. Area Code 518: 474-1492.

### THE OMBUDSMAN PROGRAM

The Ombudsman program is a drug education/primary prevention program for students in grades 5 and 6. It is designed to reduce certain psychological and attitudinal states closely related to drug use (rebelliousness, low valuing of school, poor student/teacher relationships and low self-esteem). The program is divided into three basic segments: (1) self-awareness and values clarification, (2) communication skills, decision-making and problem-solving, and (3) outreach projects and ideas for school and community. A three-day training session for teachers, counselors and other school personnel is recommended before implementing the program. Program details may be obtained directly from Chris Jones, School Team Director, Charlotte Drug Education Center, 1416 East Morehead, Charlotte, North Carolina 28204. Further information is available from the Bureau of Drug Education, New York State Education Department, Room 960 EBA, Albany, New York 12234. Area Code 518: 474-1492.

## Nationally-Validated Programs for Comprehensive Health Education

### PRIMARY GRADES HEALTH CURRICULUM PROJECT (PGHCP)

The PGHCP is a sequential health curriculum for students in grades K-3. A companion program to the School Health Curriculum Project (see next page) the PGHCP has been designed to assist children to make informed decisions about personal health practices. Grade level emphases vary, but most areas of health are covered. The design of the State Tobacco Education Curriculum and of this State Drug Education Curriculum allow them to be easily inserted in this program. Training for a school team and the purchase of materials is required before implementing the curriculum.

For more information regarding the PGHC Project, contact Nancy L. Evans, Project Associate, National Center for Health Education, School Health Curriculum Project, 901 Sneath Lane, Suite 215, San Bruno, California 94066.

## PACKAGED PROGRAMS FOR HEALTH AND DRUG EDUCATION, CONT'D

### SCHOOL HEALTH CURRICULUM PROJECT (SHCP)

The SHCP is a sequential curriculum for students in grades 4-7 (only grades 5-7 have been nationally-validated). The curriculum uses a body systems approach to health which is science-oriented. Each grade level focuses on a different body system - the digestive system, the respiratory system, the circulatory system, and the nervous system. A learning centers approach is used with student-centered activities. Teacher training and the purchase of materials is required before implementing the program.

For more information regarding the SHCP Project, contact Nancy L. Evans, Project Associate, National Center for Health Education, School Health Curriculum Project, 901 Sneath Lane, Suite 215, San Bruno, California 94066.

## Other Notable Packaged Programs

### TEENAGE HEALTH TEACHING MODULES (THTM)

Teenage Health Teaching Modules are presently being developed by the Education Development Center, Newton, Massachusetts, under contract from the Bureau of Health Education, Center of Disease Control, U.S. Department of Human Services. The project expects to increase students' knowledge, heighten their concern, and teach them skills to use in making well-informed health decisions. The project's final product will be a series of short, highly-targeted modules for middle/junior high and high school students. Activities will be designed to be implemented by teachers from a variety of subject areas, e.g., health, home economics, social studies, science, language arts, and physical education. Student modules on the following topics are currently under development: family health, nutrition and fitness, substance use, friendships and relationships, and environmental and community health. Beside student materials, other materials will be developed: resources, a teacher-training component, strategies to involve parents, and an implementation guide to advise administrators wishing to develop health education programs in their school district.

For further information regarding the project, contact Teenage Health Modules, Education Developmental Center, 55 Chapel Street, Newton, Massachusetts 02160.

### QUEST: SKILLS FOR LIVING

The Quest program emphasizes development of mental health and life skills at the high school level. The activities were developed based on a survey of over 2,000 high school students to determine the things in life that concern them the most; their answers - feelings, self-concept, friends, family, marriage, parenting, and career - form the basis of this curriculum. Teacher training is provided through summer workshops at the Sagamore Conference Center in Raquette Lake, New York and in on-site workshops are conducted during the school year.

For more information regarding this program, contact Margie Ingram, Quest Coordinator, Sagamore Institute, 110 Spring Street, Saratoga Springs, New York 12866, Area Code 518: 587-8700.

APPENDIX D

# NYS DIVISION OF SUBSTANCE ABUSE SERVICES
# BUREAU OF TRAINING AND RESOURCE DEVELOPMENT

The NYS Division of Substance Abuse Services' Bureau of Training and Resource Development can provide three major services for teachers: 1) participation in regionally scheduled training programs to build skills and knowledge related to substance abuse 2) scheduling of current awareness sessions for school-community groups and 3) library services through a Resource Center, located in New York City.

## Training Opportunities

Although the primary function of the Bureau is to provide training to staff of agencies funded and monitored by the Division of Substance Abuse Services, teachers can participate in regionally scheduled training as space permits. Training is provided in content areas such as individual, group and family counseling, treatment populations, general issues and prevention. Schedules and applications are available from the Bureau.

## Current Awareness Sessions for School-Community Groups

The Bureau accepts requests from schools, community groups, PTAs, etc. for current awareness sessions designed to increase general awareness of the substance abuse problem among parents, teachers, students, school administrations, etc. In addition to specific information on drugs and their effect on the body, sessions on communication skills, family system, parenting and programs tailored to the specific needs of your district are available. Requests for scheduling must be submitted well in advance since the demand for training services is high. For further information, contact: Robert Detor, Deputy Director for Substance Abuse Training and Resource Development, Division of Substance Abuse Services, 350 Broadway, New York, New York 10013, (212) 966-7600.

## Resource Center Services

The Resource Center, also located at the above address, is open from 8:30 a.m. to 5:00 p.m. Monday through Friday.

Resources include: 1) 1,500 books in the substance abuse field, 2) journals and newsletters, 3) article reprints, 4) pamphlets and posters and other free materials, 5) a reading room with a microfiche reader, computerized index to journal literature and a complete card catalogue.

Services are available to teachers visiting the Center. Telephone or mail requests for information will also be accepted.

## THE FOOD AND DRUG ADMINISTRATION

The Food and Drug Administration can assist teachers in two ways: 1) FDA Consumer Affairs Officers can provide pamphlets, article reprints and other information for student and teacher use and 2) Investigators from FDA Resident Inspection Posts can speak with classes regarding the role of the FDA in regulating the safety, quality and effectiveness of items offered for sale in U.S. markets. Do not hestitate to request a speaker because of your geographic distance from an office listed below. These investigators routinely travel throughout the State regarding regulatory matters.

### FDA CONSUMER AFFAIRS OFFICERS

| DISTRICT/OFFICE | ADDRESS/TELEPHONE | COUNTIES SERVED |
|---|---|---|
| NEW YORK DISTRICT<br>Brooklyn Office | Consumer Affairs Officer<br>850 3rd Avenue<br>Brooklyn, NY 11232<br>212: 9165-5754 | Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland, Suffolk, Westchester |
| BUFFALO DISTRICT<br>Buffalo Office | Consumer Affairs Officer<br>599 Delaware Avenue<br>Buffalo, NY 14202<br>716: 846-4483 | All other counties |

### FDA RESIDENT INSPECTION POSTS

| MAILING ADDRESS | TELEPHONE | QUICK REFERENCE LOCATION |
|---|---|---|
| FDA Resident Inspection Post<br>Clinton and N. Pearl Streets<br>Albany, NY 12207 | 518: 472-6043 | Albany |
| FDA Resident Inspection Post<br>P.O. Box 1093, Main Office<br>Binghamton, NY 13902 | 607: 773-2752 | Binghamton |
| FDA Resident Inspection Post<br>Meridan Road, U.S. Border Station<br>Champlain, NY 12919 | 802: 298-8240 | Champlain |

## THE FOOD AND DRUG ADMINISTRATION, CONT'D

### FDA RESIDENT INSPECTION POSTS

| MAILING ADDRESS | TELEPHONE | QUICK REFERENCE LOCATION |
|---|---|---|
| FDA Resident Inspection Post<br>P.O. Box 217<br>Hicksville, NY 11802 | 516: 433-3187 | Hicksville |
| FDA Resident Inspection Post<br>P.O. Box 3198<br>Newburgh, NY 12550 | 914: 562-2620 | Newburgh |
| FDA Resident Inspection Post<br>100 State Street, Room 328<br>Rochester, NY 14614 | 716: 263-6286 | Rochester |
| FDA Resident Inspection Post<br>100 S. Clinton, Room 1217<br>Syracuse, NY 13260 | 315: 423-5468 | Syracuse |
| FDA Resident Inspection Post<br>300 Hamilton Avenue, Room 309<br>White Plains, NY 10601 | 914: 428-4318 | White Plains |

APPENDIX F

## THE MARCH OF DIMES BIRTH DEFECTS FOUNDATION

Teachers are encouraged to use the services and materials available from the March of Dimes to enhance the drug education program. The March of Dimes develops health education materials for schools, as well as youth groups and health professionals. The materials include pamphlets, audiovisuals and exhibits which call attention to preventable birth defects, and urge prospective parents to modify behavior in ways that will protect the health of mother and child. Materials highlighting smoking, alcohol and drug use are included. Many of their health education materials may be obtained free of charge (or on loan) from your local chapter (see below), or from the National Office: Public Health Education Division, March of Dimes Birth Defects Foundation, 1275 Mamaroneck Avenue, White Plains, NY 10605, (914) 428-7100.

### FOUNDATION CHAPTERS IN NEW YORK STATE

| CHAPTER | ADDRESS | TELEPHONE | REFERENCE LOCATION |
|---|---|---|---|
| Adirondack Chapter | 26 Excelsior Springs Avenue<br>Saratoga Springs, NY 12866 | 518: 587-9600 or<br>885-5349 | Saratoga Springs |
| Capital Area Chapter | P.O. Box 5224<br>Albany, NY 12205 | 518: 458-1630 | Albany |
| Catskill Area Chapter | 219 Quassaick Avenue,<br>Suite 9<br>New Windsor, NY 12550 | 914: 562-6400 | New Windsor |
| Central New York Chapter | 702 West Belden Avenue<br>Syracuse, NY 13204 | 315: 422-4752 | Syracuse |
| Genesee Valley Finger Lakes Chapter | 21 North Main Street<br>Pittsford, NY 14534 | 716: 385-1131 | Pittsford |
| Greater New York Chapter | 622 Third Avenue<br>New York, NY 10017 | 212: 682-6430 or<br>682-1232 | New York City |
| Jefferson Chapter | 547 Woolworth Building<br>Public Square<br>Watertown, NY 13601 | 315: 782-8580 | Watertown |
| Long Island Chapter | 2 Robbins Lane<br>Jericho, NY 11753 | 516: 433-7000 | Jericho |

## THE MARCH OF DIMES BIRTH DEFECTS FOUNDATION, CONT'D

| CHAPTER | ADDRESS | TELEPHONE | REFERENCE LOCATION |
|---|---|---|---|
| Niagara Frontier Chapter | 1823 Pine Avenue<br>Rooms 207 and 208<br>Niagara Falls, NY 14301 | 716: 284-9525 | Niagara Falls |
| Oneida-Mohawk Chapter | 414 Trenton Avenue<br>Utica, NY 13502 | 315: 733-9129 | Utica |
| South Central New York Chapter | 349 Chenango Street<br>Binghamton, NY 13901 | 607: 722-8300 | Binghamton |
| Westchester-Rockland-Putnam Chapter | 35 Orchard Street<br>White Plains, NY 10603 | 914: 949-7166 | White Plains |
| Western New York Chapter | 3254 Genesee Street<br>Buffalo, NY 14225 | 716: 893-4272 | Buffalo |

## APPENDIX G

## PERIODICALS FOR TEACHERS AND STUDENTS

| DISTRIBUTOR | TITLE | PRICE | COMMENTS |
|---|---|---|---|
| Alcohol and Drug Problems Association of North America<br>1101 Fifteenth St., N.W.<br>Suite 204<br>Washington, DC 20005 | Journal of Alcohol and Drug Education (Teachers) | $10/yr. | Quarterly. |
| Alcohol, Drug Abuse and Mental Health Administration<br>Printing and Publications Management Branch<br>5600 Fishers Lane (Rm 6C02)<br>Rockville, MD 20857 | Prevention Resources (Teachers, administrators) | Free | Bi-annual; emphasizes materials and programs. |
| Curriculum Innovations, Inc.<br>501 Lake Forest Avenue<br>Highwood, IL 60040 | Current Health 1 (Grades 4-7)<br>Current Health 2 (Grades 7-12) | $3.75 per student for either periodical. Min. order: 15 subscriptions. | Monthly, May-Sept. Frequently features articles relating to substance use, abuse. |
|  | Current Lifestudies (Grades 7-12) | $7.90/yr (9 issues); $3.95/yr for 15 or more subs. | Designed for classroom use. Deals with human development, interpersonal relationships, psychology, values. |
| Do It Now Foundation<br>P.O. Box 5115<br>Phoenix, AZ 85010 | Drug Survival News (Teachers, counselors) | $4/yr | Bi-monthly. |
| Health Services and Promotion Branch<br>Department of National Health and Welfare<br>Ottawa, Ont. K1A 1B4<br>Canada | Health Education | Complimentary foreign subscriptions extended to facilitate information exchange. | Although directed at Canadians, many articles are of general interest. |

## PERIODICALS FOR TEACHERS AND STUDENTS, CONT'D

| DISTRIBUTOR | TITLE | PRICE | COMMENTS |
|---|---|---|---|
| Narcotics Education, Inc.<br>P.O. Box 4390<br>Washington, DC 20012 | Listen - A Journal of Better Living (Grades 7-12) | $9.50/1-24 subs. 9 mos. | Monthly; includes teaching guide; stresses use of modeling and skills development in prevention. |
|  | The Winner (Grades 4-6) | $3.75/9 mos;<br>$1.00/Teaching Guide | Monthly; lifestyle guidance for substance abuse prevention. |
| New York State Federation of Professional Health Educators<br>P.O. Box 72<br>Albany, NY 12201 | The Catalyst (Teachers) | $15/yr | Bi-monthly; includes membership in NYSFPHE. News, informative articles, programs, resources, research reports, information on Annual New York State Health Education Conference. |
| Scholastic Magazines<br>902 Sylvan Avenue<br>P.O. Box 2001<br>Englewood Cliffs, NJ 07632 | Scholastic Action (Grades 7-9; low reading level) | $1.95/semester | Biweekly (14 issues); teacher edition with bulk subs; integrates adolescent concerns and skills development. |
| Superintendent of Documents<br>U.S. Government Printing Office<br>Washington, DC 20402 | FDA Consumer | $12/yr | Monthly-bi-monthly (10 issues); news and articles regarding drugs and consumerism. Article reprints may sometimes be obtained free of charge. |
| Up Front, Inc.<br>P.O. Box 330589<br>Coconut Grove, FL 33133 | Street Pharmacologist (Teachers) | $20/yr | Monthly; articles, reviews, news. Attractive, illustrated, interesting. |

## REFERENCES FOR SCHOOL LIBRARIANS

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| American Guidance Service<br>Circle Pines, MN 55014 | The Bookfinder. A Guide to Children's Literature About the Needs and Problems of Youth Aged 2-15. | $31.00 | Over 1,000 books indexed by subject, author and title and described in detail. A unique and invaluable reference. |
| Association for Childhood Education International<br>3615 Wicsonsin Avenue, N.W.<br>Washington, DC 20016 | Excellent Paperbacks for Children | $3.50 | Updated periodically; annotations, developmental levels and prices given. |
| | "Guide to Children's Magazines, Newspapers, Reference Books" by Peter Madden | $.75 | Annotated. |
| R.R. Bowker Company<br>1180 Avenue of the Americas<br>New York, NY 10036 | Books to Help Children Cope With Separation and Loss by Joanne E. Bernstein | $16.25 | Developed as a reference for bibliotherapists. Contains descriptive summaries of over 400 books dealing with various life problems for children to read on their own. Interest and reading levels given. |
| Bureau of Drug Education<br>New York State Education Dept.<br>960 EBA<br>Albany, NY 12234 | Annotated Resource Guide (Alcohol, Drugs & Tobacco) - Elementary Level | Free | Descriptions and ordering information on materials for teacher use, categorized by format and audience. Supply limited. |
| | Annotated Resource Guide (Alcohol, Drugs & Tobacco) - Secondary Level | Free | |
| CompCare Publications<br>2415 Annapolis Lane, Suite 140<br>Minneapolis, MN 55441 | Catalog of Books & Things for Growth-Centered Living | Free | Pictures and describes in detail publications distributed by CompCare, which cover substance abuse prevention, mental health and healthy living in general. |
| National Clearinghouse for Drug Abuse Information<br>5600 Fishers Lane<br>Rockville, MD 20857 | Publication Status Checklist (periodically updated) | Free | Lists publications of the National Institute on Drug Abuse and indicates current availability. |

## REFERENCES FOR SCHOOL LIBRARIANS, CONT'D

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| National Humanistic Education Center<br>110 Spring Street<br>Saratoga Springs, NY 12866 | The First Catalog for Humanizing Education | $5.95 | Looseleaf ringbinder describing publications in the field of humanistic education, including many classics in affective education and values clarification, under 45 topical headings. All are available from the Center, many at reduced prices. |
| | Catalog Addendum (produced every three months) | Free | |

APPENDIX I

## REFERENCES FOR THE SCHOOL HEALTH OFFICE

| DISTRIBUTOR | TITLE AND AUTHOR | PRICE | COMMENTS |
|---|---|---|---|
| Addison-Wesley Publishing Company, Inc.<br>2725 Sand Hill Road<br>Menlo Park, CA 94025 | Drugs: A Factual Account (1980 Edition) by Daniel A. Girdano and Dorothy Dusek | $9.95 | Comprehensive reference work on commonly misused and abused drugs. Correlates with educational text used in curriculum: Drug Education Content and Methods. |
| Bantam Books<br>School and College Marketing Division<br>2451 South Wolf Road<br>Des Plains, IL 60018 | The Pill Book by Harold M. Silverman, Pharm. D. and Gilbert I. Simon, D. Sc. | $3.50 | An illustrated guide to the most prescribed drugs in the U.S. |
| CompCare Publications<br>2415 Annapolis Lane, Suite 140<br>Minneapolis, MN 55441<br>Call Toll Free: 800/328-3330 | "Adolescent Chemical Use Chart" by Dennis D. Nelson | $1.00 | Illustrates characteristic adolescent behavior as it relates to stages of substance use. |
| Harper & Row Publishers<br>10 East 53rd Street<br>New York, NY 10022 | The Essential Guide to Prescription Drugs by James W. Long, M.D. (New and Revised Edition) | $8.95 | Well-organized, detailed reference with glossary, tables and index to brand and generic name drugs. |
| Hazelden Educational Services<br>Box 176<br>Center City, MN 55012 | Drug and Alcohol Emergencies by Brent Q. Hafen, Ph.D. and Kathryn J. Frandsen | $4.95 | An overview of drugs likely to cause emergencies; signs, symptoms and treatment. |
|  | Drugs Interactions | $3.95 | Originally printed in RN Magazine. Contains 16 quick-reference tables; discussion of the why and how of drug interactions and clues to adverse drug reactions. |
| Intervention Enterprises<br>P.O. Box 84<br>New Concord, OH 43762 | The Book of Chemical Crisis by Floyd Sours | $7.95, plus $1.50 for postage and handling | Directed at crisis workers, but contains much information of interest to general audiences. |

## REFERENCES FOR THE SCHOOL HEALTH OFFICE, CONT'D

| DISTRIBUTOR | TITLE AND AUTHOR | PRICE | COMMENTS |
|---|---|---|---|
| Medical Economics Book Div.<br>Box 157<br>Florence, KY 41042 | Drug Identification Guide from Physician's Desk Reference (Sixth Edition, 1980) | $6.95 | Quick reference guide using color photos; contains directory of poison control centers. |
| Pantheon Books<br>Division of Random House, Inc.<br>201 East 50th Street<br>New York, NY 10022 | The Medicine Show by the Editors of Consumer Reports Books (1980 Revision) | $5.95 | Consumers Union's guide to everyday health problems and products. |
| Pacific Institute for Research and Evaluation<br>Suite 1006<br>7101 Wisconsin Avenue<br>Bethesda, MD 20014 | "How to Talk to Kids About Drugs" by Suzanne Fornaciari | $2.50 | A practical guide to communicating with youngsters positively. |
| PDR Physician's Desk Reference<br>Box 58<br>Oradell, NJ 07649 | Physician's Desk Reference | $15.00, plus postage | Classical, comprehensive; updated annually. |
| Random House, Inc.<br>201 East 50th Street<br>New York, NY 10022 | The American Medical Association's Handbook of First Aid and Emergency Care | $5.95 | Easy reference guide with 8-page section on drug abuse. |
| U.S. Dept. of Justice<br>Drug Enforcement Administration<br>Washington, DC 20537 | "Drugs of Abuse", reprinted from Drug Enforcement | Free | Color-illustrated categorical booklet with uses & effects chart. |

APPENDIX J

## REFERENCES FOR SCHOOL ADMINISTRATORS

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| Addison-Wesley Publishing Co., Inc.<br>2725 Sand Hill Road<br>Menlo Park, CA 94025 | Drug Education: Content and Methods (Third Edition) by Daniel A. Girdano and Dorothy Dusek | $9.95 | Includes section: Planning the Drug Education Program, as well as drugs and methods of presentation to students. |
| Allyn & Bacon, Inc.<br>470 Atlantic Avenue<br>Boston, MA 02210 | Building Effective Home-School Relationships by Ira J. Gordon and William F. Breivogel | $16.95 | A practical guide for achieving a partnership between home and school. Suggests the use of Home Visitors as catalysts for parent involvement. |
| Hazelden Literature<br>Box 176<br>Center City, MN 55012 | Harmfully Involved by William O. Manning and Jean Vinton | $4.95 | Discussion of what can be done to prevent drug abuse in the district. |
| Lyle Stuart, Inc.<br>120 Enterprise Ave.<br>Secaucus, NJ 07094 | Drugs Don't Take People, People Take Drugs by Eugene H. Kaplan, M.D. and Herbert Wieder, M.D. | $8.00 | A discussion of the causes of drug abuse, myths and misunderstandings and the ineffectiveness of treatment. |
| The C.V. Mosby Co.<br>11830 Westline Industrial Dr.<br>St. Louis, MO 63141 | Drugs in the Classroom. A Conceptual Model for School Programs by Harold J. Cornacchia, Ed.D. et.al. | $13.95 | Includes statistics; psychosocial factors; pharmacological aspects, role of the community; drug education; services; school atmosphere; coordination; evaluation. |
| | Drugs, Society and Human Behavior by Oakley Ray (Second Edition) | $14.50 (1981) price) | Comprehensive textbook; recommended for those who wish to acquire some basic knowledge about drugs and drug issues. |
| Superintendent of Documents<br>U.S. Government Printing Office<br>Washington, DC 20402 | "Beyond the Three R's: Training Teachers for Affective Education" (SN 017-024-00459-6) | $1.10 | Guidelines for training teachers in methods for effective drug education. |
| | "Doing Drug Education: The Role of the School Teacher" (SN 017-024-00460-0) | $.80 | Issues; student needs; enabling objectives for teacher attitudes, skills and knowledge. |

APPENDIX K

## MATERIALS OF SPECIAL INTEREST TO MINORITY GROUPS

| DISTRIBUTOR | TITLE & AUTHOR | LEVEL | PRICE (1980) | COMMENTS |
|---|---|---|---|---|
| American Indian Historical Society<br>1451 Masonic Avenue<br>San Fransisco, CA 94117 | The Weewish Tree: A Magazine of Indian America for Young People | Elementary - Middle | $6.50/yr (6 issues); bulk rates | Attractive, illustrated 2-color booklet with stories and facts for Native American children of all tribes. |
| Avon Books<br>Sixth Floor<br>250 West 55th Street<br>New York, NY 10019 | The Me Nobody Knows: Children's Voices from the Ghetto ed. by Stephen Joseph | Junior High - Adult | $1.75 | Poetry, letters and thoughts of ghetto school children. |
| B. L. Winch & Associates<br>45 Hitching Post Dr., Bldg. 2<br>Rolling Hills Estates, CA 90274 | The Value of Responsibility: The Story of Ralph Bunche by Ann Donegan Johnson | Grades 2-5 | $6.95 | Color-illustrated story book-style biography of a remarkable man whose willingness to take responsibility, beginning as a child, took him far. |
| Bureau of Mass Communications<br>Cultural Education Center<br>Empire State Plaza<br>Albany, NY 12230 | The First Americans | Junior - Senior High | Free on school videotape | Videotape series for Native Americans. Tapes 8 & 9 deal with alcohol and drug abuse. |
| Charles E. Merrill Pub. Co.<br>1300 Alum Creek Drive<br>Chapel Hill, NC 27514 | Teaching Children of Different Cultures in the Classroom: A Language Approach by Arnold Cheyney | Teachers | $7.95 | For elementary classrooms. |
| Do It Now Foundation<br>P.O. Box 5115<br>Phoenix, AZ 85010 | Many pamphlets available in Spanish. (Examples: "PCP;" "Alcohol/Drug Combinations;" "Substance use and Safety") | Senior High - Adult | $.15 each | Some of these are suggested as resources in the curriculum. |
| Harcourt Brace Jovanovich<br>757 Third Avenue<br>New York, NY 10017 | Eliza's Daddy by Ianthe Thomas (A Let Me Read book) | Grades 1-3 | $1.65 | Story about a Black American child who learns her divorced parents still love her. |
| Howard University Press<br>2900 Van Ness Street, N.W.<br>Washington, DC 20008 | Catalog of publications relating to Black American history and culture. | Senior High - Adult | Free | Some titles would be appropriate acquisitions for high school libraries. |

## MATERIALS OF SPECIAL INTEREST TO MINORITY GROUPS, CONT'D

| DISTRIBUTOR | TITLE & AUTHOR | LEVEL | PRICE (1980) | COMMENTS |
|---|---|---|---|---|
| Lollipop Power Inc.<br>P.O. Box 1171<br>Chapel Hill, NC 27514 | Los Adultos Tambien Lloran (Grownups Cry Too) by Nancy Hazen | All Ages | $1.85 | Illustrated story about feeling grief and anger. |
| National Foundation/March of Dimes<br>Box 2000<br>White Plains, NY 10602 | Tenga Buen Cuidado de SuBebe Antes Que Nazca | Pregnant Women | Free | Information regarding drug use during pregnancy. |
| National Institute on Drug Abuse<br>5600 Fishers Lane<br>Rockville, MD 20857 | Drug Abuse Prevention Films: A Multicultural Film Catalog. DHEW Pub. No. (ADM) 79-791 | Teachers | Free | Summaries of recommended films for use with Asian/Pacific Islanders, Blacks, Mexican Americans, Puerto Ricans and Native Americans. |
| Pocket Books<br>1230 Avenue of the Americas<br>New York, NY 10020 | Black Child Care: How To Bring Up A Healthy Black Child in America by James P. Comer, M.D., and Alvin F. Poussaint, M.D. | Parents and Teachers | $2.50 | A comprehensive guide, organized by age levels. Question and answer format. |
| Superintendent of Documents<br>U.S. Government Printing Office<br>Washington, DC 20402 | Can Drug Abuse Be Prevented in the Black Community? (SN 017-024-00534-3) | Adults | $1.30 | Illustrated booklet can be used to promote discussion. |
| | Come Closer Around the Fire. Using Tribal Legends, Myths and Stories in Preventing Drug Abuse. (SN 017-024-00821-4) | Teachers | $1.50 | For all ages. Includes a bibliography and lists of additional resources for Native Americans. |
| | Growing Up and Feeling Powerful As An American Indian (SN 017-024-00827-3) | Grades 4-6 | $1.20 | Illustrated poems that promote identity and a positive self-image among American Indian Children. |
| Vintage Books<br>Division of Random House<br>Education Department LHS<br>201 East 50th Street<br>New York, NY 10022 | The Death and Rebirth of the Seneca by Anthony F. C. Wallace | Senior High-Adult | $5.95 | The history, ethnology, psychology and renaissance of a proud tribe of American Indians of the Iroquois Nation. |

APPENDIX L

## SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| APOD Publications<br>1210 Brommer Street<br>Santa Cruz, CA 95062 | Raising Children's Self-Esteem<br>Setting Limits and Rules for Children<br>Teaching Children to Be Responsible by Harris Clemes, Ph.D. and Reynold Bean, Ed.M. | $3.00<br>$3.00<br>$3.00 | Handbooks that can be used individually or with groups. For complete program, combine with teacher resource, The Four Conditions of Self-Esteem. Set of all four books available for $10.95. |
| Avon Books<br>Sixth Floor<br>250 West 55th Street<br>New York, NY 10019 | Between Parent and Child<br>Between Parent and Teenager<br>Teacher & Child. A Book for Parents and Teachers. By Dr. Haim G. Ginott | $2.50<br>$2.50<br>$2.50 | Classics in adult-child communications, these three books offer discussions of dialogues and guidance for improving effectiveness and understanding. |
| Bantam Books, Inc.<br>666 Fifth Avenue<br>New York, NY 10019 | The Parents Book About Divorce by Richard A. Gardner, M.D. | $2.95 | Comprehensive and constructive, practical guide to helping children survive the emotional trauma of divorce. |
| Beacon Press, Inc.<br>25 Beacon Street<br>Boston, MA 02108 | Talking About Death<br>Talking About Divorce and Separation by Earl A. Grollman | $3.95<br>$3.95 | Illustrated dialogues between parent and child, including a parent's guide for use. |
| Blue Cross/Blue Shield (See NYSED's Annotated Resource Guide for regional office.) | "Childhood"<br>"Drug Abuse: Drugs in A Chemical Dependent Society" | Free | Attractive, full color-illustrated booklets. |
| Channing L. Bete Co., Inc.<br>45 Federal Street<br>Greenfield, MA 01301 | "About Your Child's Emotional Health"<br>"Understanding Adolescence"<br>"What Every Parent Should Know About Drugs and Drug Abuse" | $.75 each; bulk rates | Practical, scriptographic booklets for low reading level audiences. |

## SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| CompCare Publications<br>2415 Annapolis Lane<br>Suite 140<br>Minneapolis, MN 55441 | If Only My Family Understood Me by Don Wegscheider | $4.95 | A practical guide for all family members to provide perspective and improve family dynamics. |
| | I Never Saw the Sun Rise by Joan Donlan | $5.95 | Private journal of a chemically dependent teenager from experimentation through rehabilitation. An enlightening, emotional true story. |
| | Just So It's Healthy by Lucy Barry Robe | $2.75 | Guide to alcohol and drug use during pregnancy. |
| Contemporary Books, Inc.<br>180 North Michigan Avenue<br>Chicago, IL 60601 | Family Council. The Dreikurs Technique for Putting An End to War Between Parents and Children (and Between Children and Children) by Dr. Rudolf Dreikurs et. al. | $5.95 | A guide to setting up, maintaining and operating a Family Council in the home as a problem-solving method. |
| Do It Now Foundation<br>P.O. Box 5115<br>Phoenix, AZ 85010 | Drug Abuse: A Realistic Primer for Parents. (1980 Edition) | $.50<br>bulk rates | Information about drugs and about why children use drugs written for "parents who aren't sure of what drugs are all about." |
| Doubleday & Co., Inc.<br>School and Library Dept.<br>501 Franklin Avenue<br>Garden City, NY 11530 | Your Child's Self-Esteem by Dorothy Corkille Briggs (Dolphin Books) | $3.95 (paperback edition) | Step-by-step guidelines for raising responsible, productive, happy children. |
| Essence Publications<br>168 Woodbridge Avenue<br>Highland Park, NJ 08904 | Parents and Problems by Fred Streit, Ed.D. Pamphlet series. Some titles:<br>"Do My Parents Love Me?"<br>"Do My Parents Understand Me?"<br>"Why Can't I Do It My Way?"<br>"But They're My Friends" | $1.00 for series (6 pamphlets; bulk rates) | A research-based approach for the prevention of alcohol and drug abuse, delinquency and similar problems among adolescents. |

## SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| Follett Publishing Co.<br>1010 West Washington Blvd.<br>Chicago, IL 60607 | Survival Handbook for Preschool Mothers (Revised & Expanded) by Helen Wheeler Smith | $2.95 | Easy reference and reading for both mothers and fathers. |
| Hawthorn Books<br>2 Park Avenue<br>New York, NY 10016 | A Parents' Guilde to Child Discipline by Rudolf Dreikurs, M.D. | $3.95 | Step-by-step guide to child rearing. Stresses logical consequences method of conflict resolution. |
| | Child Safety Is No Accident by Jay M. Arena, M.D. and Miriam Bachar, M.S. | $5.95 (paperbook edition) | A comprehensive handbook for the layman on prevention and handling of household emergencies. |
| Hazelden Educational Services<br>Box 176<br>Center City, MN 55012 | "Points for Parents Perplexed About Drugs" by David C. Hancock | $.60 | Advice, discussion questions and suggested reading. |
| | But I Didn't Make Any Noise About It by Cindy Lewis-Steere | $1.95 | A mother's story of recognizing and getting help for her son's drug dependency. |
| Impact Publishers<br>P.O. Box 1094<br>San Luis Obispo, CA 93406 | Surviving With Kids: A Lifeline for Overwhelmed Parents by Wayne Bartz, Ph.D. and Richard Rasor, Ed.D. | $4.95 | Thirty principles clearly explained. Includes comic strip illustrations of negative and positive approaches to situations. |
| McGraw-Hill Book Company<br>1221 Avenue of the Americas<br>New York, NY 10020 | Helping Your Child Learn Right from Wrong. A Guide to Values Clarification by Dr. Sidney B. Simon & Sally Wendkos Olds | $2.95 | Provides 27 strategies to improve parent-child understanding and relationships. |
| NEA Distribution Center<br>The Academic Building<br>Saw Mill Road<br>West Haven, CT 06516 | Public Information Leaflet Assortment (5100-26) | $3.75 pkg. of 25 | For distribution to parents, boards of education, PTA's, other community groups. |
| New American Library, Inc.<br>120 Woodbine Street<br>Bergenfield, NJ 07621 | The Half-Parent by Brenda Maddox | $1.95 | A guide to more satisfying stepparent-stepchild relationships. |
| | How to Parent by Dr. Fitzhugh Dodson | $2.50 | Comprehensive guide; includes extensive appendices on toys and books suitable for children. |

## SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| New American Library, Inc.<br>120 Woodbine Street<br>Bergenfield, NJ 07621 | Parent Effectiveness Training by Dr. Thomas Gordon (Plume Books) | $5.95 | Classic reference for raising responsible children. |
| New York Times Book Co., Inc.<br>Three Park Avenue<br>New York, NY 10016 | Voices by Beatrice M. Sparks | $7.95 | Four troubled teenagers tell their own stories in interviews with a counselor. |
| Pacific Institute for Research and Evaluation<br>7101 Wisconsin Avenue<br>Bethesda, MD 20014 | How to Talk to Kids About Drugs by Suzanne Fornaciari | $2.50 | Booklet that could be titled "How to Talk to Kids." A six-step method is provided. |
| Psych/Graphic Publishers<br>Box 28027<br>San Diego, CA 92128 | The Parent Book. The Holistic Program for Raising the Emotionally Mature Child by Harold Bessell, Ph.D. and Thomas Kelley, Jr. | $10.00 | A source book of methods and dialogues with a bibliography of suggested children's literature. |
| Public Affairs Committee, Inc.<br>381 Park Avenue South<br>New York, NY 10016 | "Helping Children Face Crises"<br>"Runaway Teenagers" | $.50 each bulk rates | Public Affairs Pamphlets: other titles available. |
| G.P. Putnam's Sons | Self-Esteem. The Key to Your Child's Well-Being by Harris Clemes and Reynold Bean | $12.95 | Outlines the Four Conditions of Self-Esteem and provides a framework for parents to understand self-esteem, perceive where it needs improvement and foster its growth. Specific, practical and readable. |
| Simon & Schuster Building<br>Rockefeller Center<br>1230 Avenue of the Americas<br>New York, NY 10020 | The Emergency Book by Bradley Smith and Gus Stevens | $4.95 | Life-saving techniques everyone should know illustrated with photographs. Chapters on poisoning and drug overdose. |

## SELECTED MATERIALS FOR PARENT EDUCATION PROGRAMS OR PARENT USE, CONT'D

| DISTRIBUTOR | TITLE & AUTHOR | PRICE(1980) | COMMENTS |
|---|---|---|---|
| Superintendent of Documents<br>U.S. Government Printing Office<br>Washington, DC 20402 | "An Adolescent In Your Home" (SN 017-091-00202-9) | $1.50 | Discussion of problems faced by adolescents and their parents. |
| | "Child Development in the Home" (SN 017-091-00193-6) | $1.50 | Simple guidelines for raising preschool age children. |
| | "Drug Abuse Prevention for Your Family" (SN 017-024-00742-1) | $1.30 | Issues, information and resources for the layman. |
| | "For Parents Only: What You Need to Know About Marijuana" (SN 017-024-00973-3) | $1.50 | Suggest use be accompanied by appropriate awareness program. |
| | "Parents, Peers and Pot" (SN 017-024-00941-5) | $3.50 | A more comprehensive treatment than the above title. |
| | "A Woman's Choice: Deciding About Drugs" (SN 017-024-00867-2) | $1.30 | A lay guide to handling stress when drug use may add to the problem. |
| | "Why Young People Become Antisocial" (SN 017-024-00795-1) | $.90 | Discussion for increasing understanding of causes, prevention. |
| | "Yours, Mine & Ours: Tips for Stepparents" (SN 017-024-00833-8) | $2.00 | Steps to take before and after remarriage to ease family readjustment. |
| | A Family Response to the Drug Problem: Handbook (SN 017-024-00536-1) | $1.50 | Reference books for a parent program that combines chemical awareness with development of improved understanding and skills in communication. |
| | A Family Response to the Drug Problem: Group Facilitator Guidelines (LSN 017-024-00537-1) | $1.30 | |
| B.L. Winch & Associates<br>45 Hitching Post Dr.<br>Building 20<br>Rolling Hills Estates, CA 90274 | A Kid's Guide to Understanding Parents by Joy Wilt | $5.25 | Appropriate for parents to read together with children, ages 4-10. Addresses adopted, step- and foster, as well as biological, children. |

## COMMUNICATING WITH DOCTORS AND PHARMACISTS*

MEDICATIONS CAN BE VERY HELPFUL WHEN USED WISELY, BUT THEY CAN BE HARMFUL WHEN WE FAIL TO RESPECT THEIR POTENTIAL AND USE THEM CARELESSLY. EACH OF US HAS TO TAKE RESPONSIBILITY FOR OUR DRUG TAKING BY MAKING SURE WE GET THE INFORMATION NEEDED TO TAKE DRUGS CORRECTLY.

### GETTING THE INFORMATION YOU NEED FROM DOCTORS

1. When the doctor prescribes a drug, make sure you understand -
   - What the drug is for
   - When and how to take it
   - How long to take it
   - Things to do or not do
2. Tell the doctor about all the drugs you're taking, including over-the-counter drugs like aspirin or antacids.
3. If you drink alcohol, find out if it is safe to do so while taking your drugs.
4. Ask your doctor about generic drug substitutes - they usually cost less and there may be an equivalent substitute.
5. Tell the doctor about any symptoms you may be experiencing, like headaches, dizziness, stomach upset or diarrhea. It is possible that these symptoms may be side effects caused by drugs you are taking.
6. Find out if you should continue taking the medication even if your illness seems to disappear, and for how long.
7. Make a list of any questions you have about the drugs you're taking, and bring it with you to the doctor.

### GETTING THE INFORMATION YOU NEED FROM PHARMACISTS

1. Compare prices. Different pharmacies may have higher prices on some drugs, lower prices on others.
2. Ask the pharmacist to help you select over-the-counter drugs that won't interfere with the prescription drugs you're taking.
3. Ask the pharmacist:
   - If your medicine should be taken with or immediately after meals, or on an empty stomach.
   - If there are any foods you should avoid eating or drinking while you are using a medication.
   - If the drug is apt to make you less alert or sleepy, thus limiting activities you can perform safely (such as driving a car or operating power tools).
4. Ask the pharmacist any other questions you may have about the drug prescribed for you or about other medications you are using.
5. Make certain you can read and understand the label on a prescription or OTC drug you have purchased before you leave the pharmacy.
6. If possible, select a pharmacy that uses a patient-profile system (a record of the drugs prescribed for you).

*Adapted from "Communicating with Doctors and Pharmacists," New York State Committee on Prescription Drug Misuse

# POSSIBLE SIGNS OF DRUG MISUSE OR ABUSE

Since adolescents go through many changes in appearance, behavior and habits, caution should be taken in concluding that behavior signs within the normal range of variability indicate drug involvement. Certainly no one or two signs should be considered to indicate that substance abuse is the cause. If enough evidence accumulates to cause you to suspect a youngster is drug-involved, using a calm, non-threatening approach that communicates a willingness to listen and provide help where desired provides an atmosphere in which a drug-involved person may perceive s/he has the support necessary to seek help.

## GENERAL BEHAVIORAL SIGNS

- A preference for the company of others who are known drug abusers
- Repeated appearance in odd places without known reason (e.g., closets, basements, dark hallways), where drugs can be used privately
- Unusually secretive behavior regarding activities and possessions
- Withdrawal from responsibility
- Increasing irritability, showing unusual outbursts of temper
- Stealing items from home, school, merchants, employers, for sale to others
- Repeated borrowing of money from family members or friends
- Changes in school or work attendance, grades, productivity, discipline
- Loss of interest in previously enjoyed activities, hobbies, friends
- Inappropriate and unexplained wearing of sunglasses accompanied by a reluctance to have the eyes seen (may be to hide constricted or dilated pupils, but also may simply be a fad, modeling behavior or self-consciousness about appearance)
- Loss of interest in physical appearance (but this may also indicate depression)
- General changes in overall attitude, with no other identifiable cause

## SIGNS RELATED TO THE USE OF SPECIFIC DRUGS

### Glues, Aerosols, Vapors

- Unusual eye watering, nasal secretions
- Drowsiness (to unconsciousness)
- Poor muscular control
- Odor of substance on breath, body, clothes
- Paraphernalia: plastic or paper bags or rags, dry plastic cement or other solvents

### Narcotics

- Injection scars (usually on arms)
- Constricted pupils that do not respond to light
- Traces of white powder around nostrils
- Frequent drowsiness, lethargy
- Paraphernalia: syringes, bent spoons, eye droppers, rubber tubing, bottle caps

## POSSIBLE SIGNS OF DRUG MISUSE OR ABUSE, CONT'D

Stimulants (Amphetamines, Speed, Cocaine)

- Excessive activity, irritability, anxiety (user has difficulty sitting still)
- May go for long periods without eating or sleeping
- Excessive dryness of mouth and nose (this may also be caused by tension, however)
- Dilated pupils (with large doses)
- Chronically raw nasal membranes (cocaine)

Depressants (Barbiturates, Tranquilizers)

- Symptoms of alcohol intoxication without odor of alcohol on breath
- Disorientation, drowsiness, reduced coordination
- Reduced or unusual lack of interest in school and family activities, accompanied by withdrawal into self

Marijuana

- Odor of burning rope
- Redness of eyes; may be dilated pupils
- Animated, loud talking with inappropriate laughter (early intoxication stage)
- Stuporous (late intoxication stage)
- Paraphernalia, e.g. remnants of marijuana "joints," seeds in pocket linings

Hallucinogens (PCP, Mescaline, LSD)

- Erratic and exaggerated expressions of fear, terror
- Distorted perceptions of time, images, sound, touch
- Extremely unpredictable, irrational, uncontrolled mood and behavior changes

APPENDIX O

## GLOSSARY

**AMPHETAMINE:** A group of artificially produced stimulant drugs which mimic the action of the sympathetic nervous system, producing stress-like reactions. Amphetamines are used medically in diet pills.

**BARBITURATE:** A group of artifically-produced sedative drugs which inhibit the signals produced by the central nervous system. Barbiturates are used medically to reduce anxiety and pain and to treat insomnia.

**CANNABIS:** The generic name for marijuana. It is used broadly to refer to the marijuana plant, cannabis sativa, and its products.

**DEPRESSANT:** A drug that temporarily decreases the activity of some vital process or organ. Barbiturates, tranquilizers, sedatives, narcotics and alcohol are examples of depressant drug types.

**DILEMMA:** A situation in which a difficult decision must be made between two or more choices involving uncomfortable consequences. A moral dilemma is a situation involving one or more moral conflicts.

**DRUG ABUSE:** Legal and medical definitions of "drug abuse" differ, and may be contradictory. A legal definition might be: the illegal self-administration of substances. Under this definition, an adult alcoholic could not be considered a drug abuser. Some other definitions: 1) the repeated use of a substance for a purpose that it cannot pharmacologically fulfill (medical); 2) a behavior pattern characterized by the repeated use of substances to fulfill an emotional or mental need (psychological); and 3) repeated use of substances in ways that cause harm to self or others (sociological).

**DRUG DEPENDENCE:** A condition which requires continuous use of a substance to maintain normal functioning. Two types of dependence are usually recognized: psychological and physical. It is now generally agreed that physical dependence involves psychological dependence; however, psychological dependence does not necessarily involve physical dependence. Drug dependency is characterized by a behavior pattern in which there is a compulsive and increasing involvement with the use of a drug and the securing of its supply.

**DRUG MISUSE:** The improper use of a drug. Drug misuse refers to the use of a drug for any unauthorized or nonmedical purpose. It may refer to taking a medication in any way that does not concur with directions for use or for any purpose which it cannot pharmacologically fulfill.

**DRUG TOLERANCE:** A condition of the body produced by physical adjustment to the effects of a drug. As adjustment is made, a larger dose may be required to achieve an effect. Thus body tolerance may lead an individual to become involved in a spiraling habit of increased use, increased dependence and increased tolerance.

**FORCED CHOICE:** A decision which must be made between two equally attractive or unattractive alternatives.

**HABIT:** A pattern of behavior formed and repeated by an individual to meet a need.

**HALLUCINOGEN:** A substance that alters perceptions of reality by producing hallucinations (causing a person to see, hear or feel things that are not real). Substances classified as hallucinations produce these effects characteristically. Other drugs may produce hallucinations as side effects when used by some people or in particular circumstances.

**HOMEOSTASIS:** The condition of normal functioning of the body, characterized as a balanced state. The hypothalamus of the brain functions to maintain homeostasis.

**I-LANGUAGE:** A form of self-expression which provides others with information about personal needs and feelings.

**I LEARNED... STATEMENT:** An evaluation method that provides a student with an opportunity for clarifying and summarizing orally or in a written statement something learned in the course of completing an activity. Example: "I learned that I can change my feelings about something by giving myself positive messages instead of negative messages."

**I-MESSAGE:** A statement worded to let someone know how you feel in a certain situation and why without blaming another for the situation or your feelings. An I-Message usually follows the form: "I feel... when... because...."

**INHALANT:** A substance which is breathed in, or inhaled, as the primary method of self-administration. Solvents, aerosols and anesthetics are classified as inhalants.

**NARCOTIC:** A substance which produces lethargy and sleep and reduces pain. Drugs made from opium, or opiates, are narcotics. Narcotics may be categorized as depressants; they are used medically as analgesics.

**NEED:** Something required in order to live, grow, mature or thrive. Maslow identified a hierarchy of categorized needs: 1) physical needs, 2) safety needs, 3) love needs, 4) self-esteem needs and 5) self-actualization needs. Examples of physical needs include food, shelter, warmth and a healthy body. Examples of psychological needs include safety, security, love, self-sufficiency, self-control and a sense of purpose in life.

**NEUROHORMONAL TRANSMITTERS:** Chemicals emitted by neurons which cause electrical charges to be transmitted across the synapse (space) between nerve cells. Neurohormonal transmitters thus control the message given to, and received by, all the cells and systems of the body. Neurohormonal transmitters include acetylcholine, norepinephrine, serotonin and dopamine, among probably many other substances. The term neurohormonal transmitter is sometimes abbreviated to neurotransmitter.

**PSYCHOACTIVE:** Producing an effect on the emotions or the mind. Synonym: psychotropic.

**REBOUND:** A reaction of the body to the administration of a drug, which occurs after the effects of the drug have worn off. The body reacts to produce an opposite effect equal to or greater than the effect of the drug. A person who takes a stimulant drug, for example, may show symptoms of depression after use of the drug is discontinued.

**SIDE EFFECTS:** Any effects produced by a drug or medication other than those for which the drug is intended. Most, if not all, drugs produce side effects, and they differ considerably in intensity and in type with the individual and the situation.

**STIMULANT:** A substance which temporarily increases the activity of the central nervous system. Caffeine, cocaine, nicotine and amphetamines are stimulant drugs.

**STRESS:** The nonspecific response of the body to any demand made upon it. Eustress is a positive response to the demand which promotes growth and change; distress is a negative response, which causes discomfort and fatigue, illness and/or damage to the body.

**TENSION LEVEL:** The degree of pressure, activity or stress within the mind and body.

**TRANQUILIZER:** A depressant drug used to reduce anxiety and tension that reduces the emotional response of the body. Tranquilizers are commonly prescribed, and will potentiate other depressant drugs. Examples of tranquilizers include Librium and Valium.

**WITHDRAWAL:** A characteristic set of symptoms which occur after the development of drug dependence, when regular use of the drug is interrupted. Also called abstinence syndrome. Delirium tremens is a set of symptoms characteristic of alcohol withdrawal.

# EVALUATION FORM*

1. Activities My Students Liked Best (Title and Page No.): ____________________

2. Activities My Students Found Uncomfortable: ____________________

3. Activities I Thought Were Best: ____________________

4. Activities I Would Not Use (Why?): ____________________

5. Information That Was Most Helpful: ____________________

6. Sections I Did Not Use: ____________________

7. Errors That Should Be Corrected (Page No?): ____________________

8. Things That Should Be Added: ____________________

9. How Does This Curriculum Compare With Others You Have Used? (Circle One)

   Best    Better Than Most    About Average    Below Average    Worst

10. Other Comments: ____________________

*When you have completed your Drug Education Unit, please fill in this form, fold, tape or staple, and mail to the Bureau of Drug Education. We look forward to receiving your input.

New York State Education Department
Bureau of Drug Education
Albany, NY  12234

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